Image# 201610149032489070

REPORT OF RECEIPTS AND DISBURSEMENTS FOR A COMMITTEE OR ORGANIZATION SUPPORTING A NOMINATING CONVENTION (Summary Page)

| PΑ | \sim E | 1 | / 57 |
|----|----------|---|------|
| - | - דר | | /:)/ |

| | (Summary rage) | | |
|------------|---|--|-------------------------------|
| 1. | (a) Name of Committee (in full) | 2. FEC Identification No | umber |
| | Cleveland 2016 Host Committee Inc (b) Address (Number and Street) | C00567057 3. Type of Committee/C |)rganization: |
| | 1375 East Ninth Street | ☐ Convention C | ommittee |
| | (c) City, State and ZIP Code ^{29th Floor} | ───────── ※ Host Committ ☐ Other | ee |
| | Cleveland OH 44114 | | (specify) |
| | | | |
| 4. | TYPE OF REPORT (Check appropriate box(es)): | | |
| | (a) POST CONVENTION REPORT | | |
| | QUARTERLY REPORT (check one) April 15 | July 15 X October | 15 January 31 |
| | FINAL REPORT | | |
| | (b) Is this an Amendment? YES NO | | |
| | SUMMARY OF RECEIPTS AND DISBUR | SEMENTS | |
| 5. | Covering Period FROM: 09/05/2016 THROUGH: 09/30/2016 | | |
| | | Column A | Column B |
| | SECTION A — CASH BALANCE SUMMARY | This Period | Calendar Year-to-Date |
| 6 | (a) Cash on Hand January 1, 2016 | | 17902835.07 |
| 0. | (a) Cash of Fland January 1, 2010 | | |
| | (b) Cash on Hand at Beginning of Reporting Period | 3923703.42 | |
| | | 450323.80 | 36646099.63 |
| | (c) Total Receipts (From Line 20) | | |
| | (d) Subtotal (Add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 4374027.22 | 54548934.70 |
| | (4) 0001000 (1) 000 0(4) 010 0(4) 010 0(4) 010 0(4) 010 0(5) 010 000 010 0(5) | 2702640 40 | 52967555.96 |
| 7. | Total Disbursements (From Line 25) | 2792648.48 | 32907333.90 |
| 0 | Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d)) | 1581378.74 | 1581378.74 |
| _ | Debts and Obligations Owed TO the Committee | | |
| Ο. | (Itemize all on Schedule C or Schedule D) | 0.00 | |
| 10. | Debts and Obligations Owed BY the Committee | 604200.06 | |
| | (Itemize all on Schedule C or Schedule D) | 604390.06 | |
| | | | |
| | SECTION B — SUMMARY OF EXPENDITURES SUBJECT TO LIMITATIONS | | |
| 11. | Convention Expenditures (From Line 21(c)) | 2792648.48 | 43007085.43 |
| | Something Exponditions (11011 Enter Enter) | 00705.04 | |
| 12. | Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (From Line 17(c)) | 33795.91 | 585944.40 |
| | | 2758852.57 | 42421141.03 |
| | (a) Expenditures Subject to Limitation (Subtract Line 12 from Line 11) | | |
| | (b) Expenditures from Prior Years Subject to Limitation | 0.00 | 0.00 |
| | , | | 42421141.03 |
| | (c) Total Expenditures Subject to Limitation (Add Lines 12(a) and 12(b)) | | 42421141.03 |
| | certify that I have examined this report, and to the best of my knowledge | and haliaf it is true corr | act and complete |
| <i>i</i> (| | and belief it is true, com | с ы ани сонірієїє. |
| | Pinney, Jon, , , [Electro | nically Filed] 10/ | 14/2016 |
| | <u> </u> | | |
| _ | | | |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

For Further Information Contact:

Federal Election Commission Toll Free 800/424-9530 Local 202/694-1100

FE1AN056

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS (Page 2 of FEC Form 4)

| (Page 2 of FEC Form | 4) | |
|--|-----------------------------|-----------------------|
| Name of Committee (in Full) | Report Covering the Period: | |
| Cleveland 2016 Host Committee Inc | FROM: 09/05/2016 | TO: 09/30/2016 |
| | Column A | Column B |
| RECEIPTS | This Period | Calendar Year-to-Date |
| 13. Federal Funds (Itemize all on Schedule A) | 0.00 | 0.00 |
| 14. Contributions to Defray Convention Expenses: | | |
| (a) Itemized (Use Schedule A) | 416416.00 | |
| (b) Unitemized | 25.00 | |
| (c) Subtotal of Contributions to Defray Convention Expenses | 440444.00 | 05111001 00 |
| (Add Lines 14(a) and 14(b)) | 416441.00 | 35141091.08 |
| 15. Transfers from Affiliated Committees | 0.00 | 0.00 |
| 16. Loans and Loan Repayments Received (Add Lines 16(a) and 16(b)) | | |
| (a) Loans Received | 0.00 | |
| (b) Loan Repayments Received | 0.00 | |
| (c) Subtotal of Loans and Loan Repayments Received (Add Lines 14a and 14b) | 0.00 | 0.00 |
| (-) | | |
| 17. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures: | | |
| (a) Itemized (Use Schedule A) | 33795.91 | |
| (b) Unitemized | 0.00 | |
| (c) Subtotal of Refunds, Rebates, Returns of Deposits Relating to Convention | 33795.91 | 585944.40 |
| Expenditures (Add Lines 17(a) and 17(b)) | | |
| 18. Other Refunds, Rebates, Returns of Deposits: | | |
| (a) Itemized Other Refunds, Rebates, Returns of Deposits | 0.00 | |
| (b) Unitemized Other Refunds, Rebates, Returns of Deposits | 0.00 | |
| (c) Subtotal of Other Refunds, Rebates, Returns of Deposits | 0.00 | 527.41 |
| (Add Lines 18(a) and 18(b)) | | |
| 19. Other Income: | | |
| (a) Itemized (Use Schedule A) | 86.89 | |
| (b) Unitemized | 0.00 | 040500.74 |
| (c) Subtotal of Other Income (Add Lines 19(a) and 19(b)) | 86.89 | 918536.74 |
| 20. TOTAL RECEIPTS (Add Lines 13, 14(c), 15, 16(c), 17(c), 18(c) and 19(c)) | 450323.80 | 36646099.63 |
| DISBURSEMENTS | | |
| 21. Convention Expenditures: | | |
| (a) Itemized (Use Schedule B) | 2792455.28 | |
| (b) Unitemized | 193.20 | |
| (c) Subtotal of Convention Expenditures (Add Lines 21(a) and 21(b)) | 2792648.48 | 43007085.43 |
| 22. Transfers to Affiliated Committees | 0.00 | 0.00 |
| EL. Harioto to Attitude Committees | | |
| 23. Loans and Loan Repayments Made: | | |
| (a) Loans Made | 0.00 | |
| (b) Loan Repayments Made | 0.00 | |
| (c) Subtotal of Loans and Loan Repayments Made (Add Lines 23(a)and 23(b)) | 0.00 | 0.00 |
| 24. Other Disbursements: | | |
| (a) Itemized (Use Schedule B) | 0.00 | |
| (b) Unitemized | 0.00 | |
| (c) Subtotal of Other Disbursements (Add Lines 24(a) and 24(b)) | 0.00 | 9960470.53 |
| 25. TOTAL DISBURSEMENTS (Add Lines 21(c), 22, 23(c) and 24(c)) | 2792648.48 | 52967555.96 |
| 20 2 2 2 ((((| | |

FE1AN056.PDF

| SCHEDULE A (FEC Form 4) TEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | ry of the 13 14a 15 16a | | | | |
|---|---|-----------------------------------|-----------------------|------------------------------|--|---|
| Any information copied from such Reports and Stat or for commercial purposes, other than using the na | | | rson for the pur | rpose of soli | citing contributions | |
| Cleveland 2016 Host Committee | Inc | | | | | |
| 2016 | State OH C | Zip Code 44122 Year-to-Date | | tion ID : SA | 2016 17A.11128 ipt this Period 10000.00 | |
| Full Name (Last, First, Middle Initial) 3. Buffalo Lodging Associates, LLC - Homew Mailing Address 25725 Central Parkway | ood Suite | s | Date of R | eceipt | 2016 | |
| City Beachwood | State OH | Zip Code 44122 | | tion ID : SA1 f Each Rece | ipt this Period | _ |
| FEC ID number of contributing federal political committee. Name of Employer | Occupation | | Deposit refu | und | 10000.00 | _ |
| Receipt For: 2016 Primary General Other (specify) Convention | Aggregate | Year-to-Date 20000.00 | | | | |
| Full Name (Last, First, Middle Initial) Coral Management Mailing Address 13219 Shaker Square | | | Date of R | eceipt | 2016 | |
| City Cleveland | State | Zip Code | | tion ID : SA | | |
| FEC ID number of contributing federal political committee. | OH C | 44120 | Amount of Deposit ref | , | ipt this Period 380.70 | |
| Receipt For: 2016 Primary General Other (specify) Convention | Aggregate | Year-to-Date 380.70 | | | | |
| SUBTOTAL of Receipts This Page (optional) | | | | , | 20380.70 | |
| TOTAL This Period (last page this line number onl | ly) | | | , | , | |

| SCHEDULE A (FEC Form 4) | | FOR LINE NUMBER: PAGE 4 OF 57 |
|--|---|--|
| TEMIZED RECEIPTS | Use separate schedule(s) for each category of the | (check only one) |
| | Detailed Summary Page | 13 14a 15 16a 16b x 17a 18a 19a |
| Any information copied from such Reports and Statem or for commercial purposes, other than using the nam | | |
| NAME OF COMMITTEE (In Full) Cleveland 2016 Host Committee In | С | |
| Full Name (Last, First, Middle Initial) A. CORT Furniture Mailing Address 4698 Great Northern Blvd | | Date of Receipt |
| | State Zip Code | 09 30 2016 Transaction ID : SA17A.11083 |
| North Olmstead | OH 44070 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 12149.15 |
| Name of Employer Oc | cupation | Deposit refund |
| Receipt For: 2016 Primary General Other (specify) Convention | gregate Year-to-Date | |
| Full Name (Last, First, Middle Initial) FirstEnergy Corp. | | Date of Receipt |
| Mailing Address 76 South Main Street | 7.01 | 09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| - ' | State Zip Code OH 44308 | Transaction ID : SA17A.11126 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 54.95 |
| Name of Employer Oc | cupation | Refund |
| Receipt For: 2016 Primary General Other (specify) Convention | gregate Year-to-Date 259957.45 | |
| Full Name (Last, First, Middle Initial) C. K&D Management | | Date of Receipt |
| Mailing Address 1621 Euclid Ave. Suite 300 | | 09 / 19 / 2016 |
| City | State Zip Code OH 44115 | Transaction ID : SA17A.11124 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 793.02 |
| Name of Employer Oc | cupation | Deposit refund |
| Receipt For: 2016 Primary General Other (specify) Convention | gregate Year-to-Date 181689.40 | |
| SUBTOTAL of Receipts This Page (optional) | | 12997.12 |

| SCHEDULE A (FEC Form 4) TEMIZED RECEIPTS Any information copied from such Reports and | Statements m | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 5 OF 57 (check only one) 13 |
|---|------------------------------------|---|--|
| or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Cleveland 2016 Host Committee | ne name and a | | |
| Full Name (Last, First, Middle Initial) Main Event Merchandise Group Mailing Address 6880 Hillsdale Court City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2016 Primary General Other (specify) Convention | State IN C Occupation Aggregate | Zip Code 46250 Year-to-Date | Date of Receipt 99 27 2016 Transaction ID : SA17A.11117 Amount of Each Receipt this Period 91.73 refund |
| Full Name (Last, First, Middle Initial) Ohio Bureau of Workers' Compensatio Mailing Address 30 W. Spring St. City Columbus FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2016 Primary General Convention | State OH C | Zip Code 43215 Year-to-Date | Date of Receipt M 99 |
| Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) | State C Occupation Aggregate | Zip Code Year-to-Date | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| SUBTOTAL of Receipts This Page (optional) | | | 418.09 |

| | _ | | FOR LINE WINDER TO SEE TO SEE | | |
|---|---------------------------|--------------------------|--|--|--|
| SCHEDULE A (FEC Form 4) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 6 OF 57 (check only one) | | |
| TEMIZED RECEIPTS | | for each category of the | 13 14a 15 16a | | |
| | | Detailed Summary Page | 16b 17a 18a X 19a | | |
| Any information copied from such Reports and S or for commercial purposes, other than using the | | | rson for the purpose of soliciting contributions | | |
| NAME OF COMMITTEE (In Full) | | | | | |
| Cleveland 2016 Host Committe | e Inc | | | | |
| Full Name (Last, First, Middle Initial) A. KeyCorp | | | Date of Receipt | | |
| Mailing Address 127 Public Square | | | 09 / 09 / 2016 | | |
| City | State | Zip Code | Transaction ID : SA19A.10830 | | |
| Cleveland | ОН | 44114 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | С | | 86.89 | | |
| Name of Employer | Occupation | | Interest | | |
| Receipt For: 2016 | Aggregate Y | ear-to-Date | | | |
| Primary General | 133.53.11 | | | | |
| Other (specify) Convention | | 721282.58 | | | |
| Full Name (Last, First, Middle Initial) 3. | | | Date of Receipt | | |
| Mailing Address | | | M = M / D = D / Y = Y = Y | | |
| City | State | Zip Code | | | |
| | | | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | С | | | | |
| Name of Employer | Occupation | | | | |
| Receipt For: | Aggregate Y | ear-to-Date | | | |
| Primary General | 33 3 | | | | |
| Other (specify) | | | | | |
| Full Name (Last, First, Middle Initial) | | | Date of Receipt | | |
| Mailing Address | M = M / D = D / Y = Y = Y | | | | |
| City | City State Zip Code | | | | |
| FEC ID number of contributing | | | Amount of Each Receipt this Period | | |
| federal political committee. | С | | | | |
| Name of Employer | Occupation | | | | |
| Receipt For: | Aggregate Y | ear-to-Date | 7 | | |
| Primary General | 12.0 | | | | |
| Other (specify) | | | | | |
| SUPTOTAL of Pagainta This Paga (antional) | | | 86.89 | | |

FEC Schedule A (Form 4) (Revised 1/01)

| SCHEDULE A (FEC Form 4) TEMIZED RECEIPTS Any information copied from such Reports and | Statements ma | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7 OF 57 (check only one) 13 |
|---|--|---|--|
| or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Cleveland 2016 Host Committee | | ddress of any political committee | to solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) A. Anheuser-Busch Mailing Address 700 Schrock Road City Columbus FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2016 Primary General V Other (specify) Convention | State OH C Occupation Aggregate | Zip Code 43229 Year-to-Date | Date of Receipt M M M / 27 2016 Transaction ID : SA14A.10988 Amount of Each Receipt this Period 316.00 |
| Full Name (Last, First, Middle Initial) Hendricks, Diane, , , Mailing Address One ABC Parkway City Beloit FEC ID number of contributing federal political committee. Name of Employer ABC Supply Receipt For: 2016 Primary General X Other (specify) Convention | State WI C Occupation Co-Founde Aggregate | | Date of Receipt M 09 |
| Full Name (Last, First, Middle Initial) Superior Beverage Group Mailing Address 31031 Diamond Parkway City Glenwillow FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2016 Primary General Other (specify) Convention | State OH C Occupation Aggregate | Zip Code 44139 Year-to-Date | Date of Receipt M M M / D D / 2016 Transaction ID: SA14A.11131 Amount of Each Receipt this Period 16100.00 |
| SUBTOTAL of Receipts This Page (optional). | | | 416416.00 |

PAGE 8 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the Detailed Summary Page **X** 21a 22 23a

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Cleveland 2016 Host Committee Inc Full Name (Last, First, Middle Initial) Date of Disbursement A. 308 Euclid LTD Mailing Address P.O. Box 14100 16 2016 City State Zip Code Amount of Each Disbursement this Period OH Cleveland 44114 Purpose of Disbursement 32.50 Parking 001 Transaction ID: SB21A.11136 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General President Other (specify) State: District: Convention Full Name (Last, First, Middle Initial) B. ABM Date of Disbursement Mailing Address 1212 Huron Road 09 2016 City State Zip Code Amount of Each Disbursement this Period Cleveland ОН 44114 5085.00 Purpose of Disbursement 001 Parking Transaction ID: SB21A.10911 Candidate Name Category/ Type Office Sought: House Disbursement For: 2016 Senate Primary General President X Other (specify) Convention District: State: Full Name (Last, First, Middle Initial) Date of Disbursement C. Action Door Mailing Address 201 E Granger Rd 18 2016 City State Zip Code Amount of Each Disbursement this Period OH Brooklyn Hts 44131 606.25 Purpose of Disbursement 001 Door repair Transaction ID: SB21A.11055 Candidate Name Category/ Type Office Sought: House Disbursement For: 2016 Senate Primary General President X Other (specify) State: District: Convention 5723.75 SUBTOTAL of Disbursements This Page (optional).....

PAGE 9 OF 57 FOR LINE NUMBER:

| IT | EMIZED DISBURSEMENTS | Use separate schedule(s for each category of the Detailed Summary Page | (check only | one) 22 23a 23b 24a |
|-------------|--|--|-------------------|---|
| | ny information copied from such Reports and Statem for commercial purposes, other than using the nam | | | |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | Cleveland 2016 Host Co | ommittee Inc | | |
| _ | Full Name (Last, First, Middle Initial) | | | |
| Α. | Adcom | | | Date of Disbursement |
| | Mailing Address 1370 West 6th Street 3rd Floor | | | 09 13 2016 |
| | City | State Zip Code | | Amount of Each Disbursement this Period |
| | | OH 44113 | | |
| | Purpose of Disbursement Letterhead | | 001 | 780.00 |
| | Candidate Name | | | Transaction ID : SB21A.11056 |
| | Candidate Name | | Category/ Type | |
| | Office Sought: House Disburser | nent For: 2016 | 71 | |
| | Senate | Primary General | | |
| | | Other (specify) | | |
| _ | State: District: | Cor | nvention | |
| D | Full Name (Last, First, Middle Initial) | | | Date of Disbursement |
| υ. | Adcom | | | M M / D D / Y Y Y Y |
| | Mailing Address 1370 West 6th Street 3rd Floor | | | 09 26 2016 |
| | | State Zip Code | | Amount of Each Disbursement this Period |
| | | OH 44113 | | 426.97 |
| | Purpose of Disbursement Letterhead/envelopes/business cards | | 001 | |
| | Candidate Name | | Category/ Type | Transaction ID : SB21A.10882 |
| | Office Sought: House Disbursen | nent For: 2016 | | |
| | | Primary General | | |
| | State: President X | Other (specify) | onvention | |
| _ | Full Name (Last, First, Middle Initial) | | on vondon | |
| C. | Blue Technologies | | | Date of Disbursement |
| | | | | M M / D D / Y Y Y Y |
| | Mailing Address 5885 Grant Ave | | | 09 05 2016 |
| | • | State Zip Code | | Amount of Each Disbursement this Period |
| | Cleveland Purpose of Disbursement | OH 44105 | | 468.88 |
| | Office equipment | | 001 | |
| | Candidate Name | | Category/ Type | Transaction ID: SB21A.11050 |
| | Office Sought: House Disburser | nent For: 2016 | | |
| | | Primary General | | |
| | | Other (specify) | onvention | |
| Г | State: District: | | OUVEUROU | |
| s | SUBTOTAL of Disbursements This Page (optional) | | | 1675.85 |
| Т | OTAL This Period (last page this line number only) | | | |

schedule(s) FOR LINE NUMBER: PAGE 10 OF 57

| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page (check o | , |
|---|---|--|
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name | ents may not be sold or used by any per | rson for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | | |
| $^{ angle}$ Cleveland 2016 Host Co | ommittee Inc | |
| Full Name (Last, First, Middle Initial) | | Date (D) |
| A. Blue Technologies | | Date of Disbursement |
| Mailing Address 5885 Grant Ave | | 09 20 / 2016 |
| City | tate Zip Code | Amount of Each Disbursement this Period |
| | OH 44105 | |
| Purpose of Disbursement Office equipment | 001 | 69.85 Transaction ID : SB21A.10951 |
| Candidate Name | Category/ Type | |
| Senate | nent For: 2016 Primary General Other (specify) Convention | |
| Full Name (Last, First, Middle Initial) | | |
| 3. BridgeStreet Corporate Housing, Ll | _C | Date of Disbursement |
| Mailing Address 11180 Sunrise Valley Dr. | | 09 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| , | tate Zip Code | Amount of Each Disbursement this Period |
| | VA 20191 | |
| Purpose of Disbursement Utilities | 001 | 8.28 Transaction ID : SB21A.10952 |
| Candidate Name | Category/ Type | |
| Senate [] | nent For: 2016 Primary General Other (specify) | |
| State: District: | Convention | |
| Full Name (Last, First, Middle Initial) | | Date of Dishumana |
| Campaign Promotions LLC | | Date of Disbursement |
| Mailing Address 1919 M St., NW #200 | | 09 07 7 2016 |
| , | tate Zip Code | Amount of Each Disbursement this Period |
| | DC 20036 | |
| Purpose of Disbursement Signage | 001 | 8179.66 Transaction ID : SB21A.10913 |
| Candidate Name | Category/ Type | |
| Senate [] | nent For: 2016 Primary General Other (specify) Convention | |
| J. J | CONTONION | |
| SUBTOTAL of Disbursements This Page (optional) | | 8257.79 |
| TOTAL This Period (last page this line number only). | | , , |

| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | | | | PAG | E | 11 OF 5 | 7 | | | |
|---|-----------------------------------|---|-----|--|----|-----|-----|---------|-----|--|-----|--|
| | | × | 21a | | 22 | | 23a | | 23b | | 24a | |
| ents may not be sold or used by any person for the purpose of soliciting contributions and address of any political committee to solicit contributions from such committee. | | | | | | | | | | | | |

Any information copied from such Reports and Stateme or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Cleveland 2016 Host Committee Inc Full Name (Last, First, Middle Initial) Date of Disbursement A. City of Cleveland, Ohio Mailing Address 601 Lakeside Ave 2016 Room 127 City State Zip Code Amount of Each Disbursement this Period OH Cleveland 44114 3360.00 Purpose of Disbursement Parking 001 Transaction ID: SB21A.11057 Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Senate Primary General President X Other (specify) Convention State: District: Full Name (Last, First, Middle Initial) B. City of Cleveland, Ohio Date of Disbursement Mailing Address 09 2016 601 Lakeside Ave Room 127 City State Zip Code Amount of Each Disbursement this Period Cleveland ОН 44114 Purpose of Disbursement 126585.95 001 Parking Transaction ID: SB21A.10885 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General President X Other (specify) Convention State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Cleveland Indians Baseball Company LP Mailing Address 2401 Ontario St. 2016 City State Zip Code Amount of Each Disbursement this Period OH Cleveland 44115 139566.72 Purpose of Disbursement Venue admissions 001 Transaction ID: SB21A.11058 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General President X Other (specify) State: District: Convention 269512.67 SUBTOTAL of Disbursements This Page (optional).....

FEC Schedule B (Form 4) (Revised 1/01)

FOR LINE NUMBER: PAGE 12 OF 57

| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page (check onl | y one) |
|--|---|---|
| Any information copied from such Reports and Statemor for commercial purposes, other than using the name | | |
| NAME OF COMMITTEE (In Full) | | |
| $^{ angle}$ Cleveland 2016 Host Co | ommittee Inc | |
| Full Name (Last, First, Middle Initial) | | 5. (5.1 |
| A. Cleveland State University | | Date of Disbursement |
| Mailing Address 2450 Euclid Ave. | | 09 / 13 / 2016 |
| • | tate Zip Code DH 44115 | Amount of Each Disbursement this Period |
| Purpose of Disbursement | 77110 | 112620.00 |
| Lodging | 001 | Transaction ID : SB21A.11113 |
| Candidate Name | Category/ Type | |
| Senate President X | ent For: 2016 Primary General Other (specify) | |
| State: District: | Convention | |
| Full Name (Last, First, Middle Initial) 3. Comfort Inn | | Date of Disbursement |
| | | M M / D D / Y Y Y Y |
| Mailing Address 1800 Euclid | | 09 08 2016 |
| | tate Zip Code | Amount of Each Disbursement this Period |
| Cleveland C Purpose of Disbursement | DH 44115 | 117595.63 |
| Lodging | 001 | |
| Candidate Name | Category/ Type | Transaction ID : SB21A.10923 |
| Senate F | ent For: 2016 Primary General Other (specify) | |
| State: District: | Convention | |
| Full Name (Last, First, Middle Initial) | | |
| CORT Furniture | | Date of Disbursement |
| Mailing Address 4698 Great Northern Blvd | | 09 / 16 / 2016 |
| • | tate Zip Code | Amount of Each Disbursement this Period |
| | DH 44070 | 44.70 |
| Purpose of Disbursement Furniture rental | 001 | 44.79 |
| Candidate Name | Category/ Type | Transaction ID : SB21A.11059 |
| Office Sought: House Disbursem | ent For: 2016 | |
| | Primary General | |
| President x (| Other (specify) | |
| State: District: | Convention | |
| SUBTOTAL of Disbursements This Page (optional) | | 230260.42 |
| TOTAL This Period (last page this line number only) | | |

schedule(s) FOR LINE NUMBER: PAGE 13 OF

| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page (check only 21a | y one) |
|---|---|---|
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name | ents may not be sold or used by any person | |
| NAME OF COMMITTEE (In Full) | | |
| $^{ angle}$ Cleveland 2016 Host Co | ommittee Inc | |
| Full Name (Last, First, Middle Initial) | | B (B) . |
| A. Cuyahoga County | | Date of Disbursement |
| Mailing Address 2079 East Ninth Street | | 09 30 / 2016 |
| City | tate Zip Code | Amount of Each Disbursement this Period |
| | OH 44115 | 7 21 21211 2122 2133 |
| Purpose of Disbursement | 004 | 2329.40 |
| Lodging Candidate Name | 001 | Transaction ID : SB21A.10887 |
| Candidate Name | Category/ Type | |
| Senate | nent For: 2016 Primary General Other (specify) Convention | |
| Full Name (Last, First, Middle Initial) | | |
| 3. Hyatt Regency Cleveland at the Arc | cade | Date of Disbursement |
| Mailing Address 420 Superior Avenue | | 09 / 30 / 2016 |
| , | tate Zip Code | Amount of Each Disbursement this Period |
| | OH 44114 | 2220.40 |
| Purpose of Disbursement Lodging | 001 | 2329.40 |
| Candidate Name | Category/ Type | Transaction ID : SB21A.10887.0 X |
| Senate | nent For: 2016 Primary General Other (specify) | |
| State: District: | Convention | |
| Full Name (Last, First, Middle Initial) | | B (B) . |
| Destination Cleveland | | Date of Disbursement |
| Mailing Address 334 Euclid Ave | | 09 30 / 2016 |
| City | itate Zip Code | Amount of Each Disbursement this Period |
| | OH 44114 | |
| Purpose of Disbursement | 001 | 75000.00 |
| Administrative consulting Candidate Name | | Transaction ID : SB21A.10897 |
| Candidate Natifie | Category/ Type | |
| Office Sought: House Disbursem | nent For: 2016 | |
| | Primary General | |
| | Other (specify) | |
| State: District: | Convention | |
| SUBTOTAL of Disbursements This Page (optional) | | 77329.40 |
| TOTAL This Period (last page this line number only). | | |

schedule(s) FOR LINE NUMBER: PAGE 14 OF 57

| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | ie | | | | |
|---|---|---|--|--|--|--|
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name | ents may not be sold or used by any pers | son for the purpose of soliciting contributions | | | | |
| NAME OF COMMITTEE (In Full) | | | | | | |
| $^{ angle}$ Cleveland 2016 Host Co | ommittee Inc | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| Doubletree by Hilton Cleveland Dov | Date of Disbursement | | | | | |
| Mailing Address 1111 Lakeside Avenue E | | 09 07 7 2016 | | | | |
| City | tate Zip Code | Amount of Each Disbursement this Period | | | | |
| 212.12.12.12 | OH 44114 | | | | | |
| Purpose of Disbursement Lodging | 001 | 31903.59 Transaction ID : SB21A.10924 | | | | |
| Candidate Name | Category/ Type | | | | | |
| Senate President | nent For: 2016 Primary General Other (specify) Convention | | | | | |
| State: District: Full Name (Last, First, Middle Initial) | Convention | | | | | |
| 3. Downing, Diane, , , | | Date of Disbursement | | | | |
| Mailing Address 11302 Lake Ave | 09 27 2016 | | | | | |
| • | tate Zip Code | Amount of Each Disbursement this Period | | | | |
| Cleveland (Purpose of Disbursement | OH 44102 | 30000.00 | | | | |
| Wages | 001 | Transaction ID : SB21A.10880 | | | | |
| Candidate Name | Category/ Type | 1141154CUOII ID : 3DZ1A.10880 | | | | |
| Senate I | nent For: 2016 Primary General Other (specify) | | | | | |
| State: District: | Convention | | | | | |
| Full Name (Last, First, Middle Initial) | | Date of Dishuranasi | | | | |
| Downtown Cleveland Alliance | | Date of Disbursement | | | | |
| Mailing Address 1010 Euclid Ave 3rd Floor | 09 05 2016 | | | | | |
| • | tate Zip Code DH 44115 | Amount of Each Disbursement this Period | | | | |
| Purpose of Disbursement Event/janitorial | 001 | 3826.59 | | | | |
| Candidate Name | Category/ Type | Transaction ID : SB21A.11045 | | | | |
| Senate I | pent For: 2016 Primary General Other (specify) Convention | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | 65730.18 | | | | |
| | | | | | | |
| TOTAL This Period (last page this line number only). | | | | | | |

| | | FOR LINE NUMBER: | | | | | | PAG | Е | 15 | OF | 57 | |
|--|------------------|------------------|-----|--|----|--|-----|-----|-----|----|-----|----|--|
| Use separate schedule(s) for each category of the | (check only one) | | | | | | | | | | | | |
| Detailed Summary Page | | | | | | | | | | | | | |
| zotanou oummary r ago | | X | 21a | | 22 | | 23a | | 23b | | 24a | a | |
| onts may not be sold or used by any person for the purpose of soliciting contributions | | | | | | | | | | | | | |

Any information copied from such Reports and Statements may not be sold or us or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Cleveland 2016 Host Committee Inc Full Name (Last, First, Middle Initial) Date of Disbursement A. Downtown Cleveland Alliance Mailing Address 1010 Euclid Ave 2016 3rd Floor City State Zip Code Amount of Each Disbursement this Period OH Cleveland 44115 20385.00 Purpose of Disbursement Lodging & transportation 001 Transaction ID: SB21A.11052 Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Senate Primary General President X Other (specify) Convention State: District: Full Name (Last, First, Middle Initial) B. Downtown Cleveland Alliance Date of Disbursement Mailing Address 09 2016 1010 Euclid Ave 3rd Floor City State Zip Code Amount of Each Disbursement this Period Cleveland ОН 44115 904.75 Purpose of Disbursement Beautification 001 Transaction ID: SB21A.11060 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General President X Other (specify) Convention District: State: Full Name (Last, First, Middle Initial) Date of Disbursement C. Enterprise Mailing Address 8249 Mohawk D 2016 City State Zip Code Amount of Each Disbursement this Period OH Strongsville 44136 144535.76 Purpose of Disbursement Car rental 001 Transaction ID: SB21A.10910 Candidate Name Category/ Type Office Sought: House Disbursement For: 2016 Senate Primary General President X Other (specify) State: District: Convention 165825.51 SUBTOTAL of Disbursements This Page (optional)

schedule(s) FOR LINE NUMBER: PAGE 16 OF

| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page (check onl | y one) |
|--|--|---|
| Any information copied from such Reports and Statemor for commercial purposes, other than using the name | ents may not be sold or used by any person | |
| NAME OF COMMITTEE (In Full) | | |
| $^{ angle}$ Cleveland 2016 Host Co | ommittee Inc | |
| Full Name (Last, First, Middle Initial) | | 5. (5:1 |
| A. Extended Stay America | | Date of Disbursement |
| Mailing Address 10300 Cascade Crossing | | 09 / 20 / 2016 |
| City | ate Zip Code | Amount of Each Disbursement this Period |
| , | DH 44114 | |
| Purpose of Disbursement Lodging | 001 | 31715.30 |
| Candidate Name | Category/ | Transaction ID : SB21A.10925 |
| Senate F | ent For: 2016 Primary General Other (specify) Convention | |
| Full Name (Last, First, Middle Initial) | | |
| 3. Fastsigns | | Date of Disbursement |
| Mailing Address 2102 St. Clair Ave | | 09 / 16 / 2016 |
| • | ate Zip Code | Amount of Each Disbursement this Period |
| | DH 44114 | 116.00 |
| Purpose of Disbursement Signage | 001 | 116.92 |
| Candidate Name | Category/ Type | Transaction ID : SB21A.11061 |
| Senate F | ent For: 2016 Primary General Other (specify) | |
| State: District: | Convention | |
| Full Name (Last, First, Middle Initial) Food for Thought | | Date of Disbursement |
| Mailing Address 7574 St. Clair Ave. | | 09 |
| | | |
| · · · | rate Zip Code DH 44060 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Food & Beverage | 001 | 309.75 |
| Candidate Name | Category/ Type | Transaction ID : SB21A.11044 |
| Office Sought: House Disbursem | ent For: 2016 | |
| | Primary General | |
| | Other (specify) | |
| State: District: | Convention | |
| SUBTOTAL of Disbursements This Page (optional) | | 32141.97 |
| TOTAL This Period (last page this line number only) | | |

PAGE 17 OF 57 FOR LINE NUMBER:

| TEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | check only one) |
|---|---|---|
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name | | |
| NAME OF COMMITTEE (In Full) | | |
| $^{ angle}$ Cleveland 2016 Host Co | ommittee Inc | |
| Full Name (Last, First, Middle Initial) | | |
| Forest City Commercial Manageme | nt, Inc | Date of Disbursement |
| Mailing Address 1228 Euclid Ave | | 09 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| • | tate Zip Code DH 44114 | Amount of Each Disbursement this Period |
| Cleveland Purpose of Disbursement | OH 44114 | 2100.00 |
| Facility/room rental | | 001 |
| Candidate Name | | Transaction ID : SB21A.10994 tegory/ Type |
| Senate | ent For: 2016 Primary General Other (specify) Convention | |
| Full Name (Last, First, Middle Initial) | | |
| 3. Gilbert, David, , , | | Date of Disbursement |
| Mailing Address 32262 Springsside Lane | 09 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| City S | tate Zip Code | Amount of Each Disbursement this Period |
| Solon | DH 44139 | |
| Purpose of Disbursement Wages | | 001 Transaction ID : SB21A.10896 |
| Candidate Name | | tegory/ Type |
| Senate President X | ent For: 2016 Primary General Other (specify) | |
| State: District: | Conven | ition |
| Full Name (Last, First, Middle Initial) Greater Cleveland RTA | | Date of Disbursement |
| Mailing Address 1240 W 6th Street | | 09 162016 |
| · | tate Zip Code DH 44113 | Amount of Each Disbursement this Period |
| Purpose of Disbursement | | 36000.00 |
| Transportation | | 001 Transaction ID : SB21A.11062 |
| Candidate Name | | tegory/ Type |
| Senate | ent For: 2016 Primary General Other (specify) Conver | ntion |
| SUBTOTAL of Disbursements This Page (optional) | | 178100.00 |
| TOTAL This Period (last page this line number only). | | |

| Image# 201610149032489087 | | | | |
|--|---|--|---|--|
| SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE N (check only | | |
| Any information copied from such Reports and Statem or for commercial purposes, other than using the nam- | | | | |
| NAME OF COMMITTEE (In Full) Cleveland 2016 Host Co | ommittee Inc | | | |
| Full Name (Last, First, Middle Initial) | .: | | Date of Disbursement | |
| A. Greater Cleveland Sports Commiss Mailing Address 334 Euclid Ave | sion | | 09 16 2016 | |
| City S Cleveland Purpose of Disbursement Wages | 001 | Amount of Each Disbursement this Period 58484.88 | | |
| Candidate Name | | Category/ Type | Transaction ID : SB21A.11047 | |
| Senate | nent For: 2016 Primary General Other (specify) | ention | | |
| Full Name (Last, First, Middle Initial) B. Greater Cleveland Sports Commiss Mailing Address 334 Euclid Ave | I Name (Last, First, Middle Initial) reater Cleveland Sports Commission | | | |
| , | otate Zip Code OH 44114 | 001 Category/ Type | Amount of Each Disbursement this Period 75000.00 Transaction ID: SB21A.11048 | |
| Senate President State: District: | nent For: 2016 Primary General Other (specify) Con | vention | | |
| Full Name (Last, First, Middle Initial) C. Hampton Inn & Suites Cleveland D Mailing Address 1460 East 9th Street | owntown | | Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| | tate Zip Code | | Amount of Each Disbursement this Period | |

TOTAL This Period (last page this line number only)

SUBTOTAL of Disbursements This Page (optional).....

OH

Disbursement For: 2016

Primary

X Other (specify)

44114

General

001

Category/ Type

Convention

73635.85

207120.73

Transaction ID: SB21A.11063

Cleveland

Lodging

State:

Candidate Name

Office Sought:

Purpose of Disbursement

House Senate

District:

President

PAGE 19 OF 57 FOR LINE NUMBER:

| TEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | (check only | one) 2223a23b24a |
|---|---|-------------------|---|
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name | | | |
| NAME OF COMMITTEE (In Full) | | | |
| $^{ angle}$ Cleveland 2016 Host Co | ommittee Inc | | |
| Full Name (Last, First, Middle Initial) | | | |
| Hampton Inn & Suites Cleveland Do | owntown | | Date of Disbursement |
| Mailing Address 1460 East 9th Street | | | 09 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | tate Zip Code | | Amount of Each Disbursement this Period |
| 0.0 / 0.0 | OH 44114 | | |
| Purpose of Disbursement Lodging | | 001 | 6045.76 |
| Candidate Name | | | Transaction ID : SB21A.11064 |
| Candidate Ivallie | | Category/ Type | |
| Senate | Primary General Other (specify) | vention | |
| Full Name (Last, First, Middle Initial) | CONV | J. MOIT | |
| 3. Hilton Garden Inn | | | Date of Disbursement |
| | | | M M / D D / Y Y Y Y |
| Mailing Address 1100 Carnegie Ave | | | 09 14 2016 |
| , | tate Zip Code | | Amount of Each Disbursement this Period |
| | OH 44115 | | 257742.46 |
| Purpose of Disbursement Lodging | | 001 | |
| Candidate Name | | Category/ Type | Transaction ID: SB21A.10929 |
| Senate Fresident X | Primary General Other (specify) | | |
| State: District: | Cor | nvention | |
| Full Name (Last, First, Middle Initial) | | | Data of Dishursoment |
| Hudson Incentives & Imprints | | | Date of Disbursement |
| Mailing Address 1592 Georgetown Rd. | | | 09 16 2016 |
| • | tate Zip Code | | Amount of Each Disbursement this Period |
| | DH 44236 | | 3827.27 |
| Purpose of Disbursement Event supplies | | 001 | 3621.21 |
| Candidate Name | | Category/ Type | Transaction ID : SB21A.11082 |
| Office Sought: House Disbursem | ent For: 2016 | | |
| | Primary General | | |
| President x | Other (specify) | | |
| State: District: | Col | nvention | |
| SUBTOTAL of Disbursements This Page (optional) | | | 267615.49 |
| TOTAL This Period (last page this line number only). | | | |

PAGE 20 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the Detailed Summary Page **X** 21a 22 23a

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Cleveland 2016 Host Committee Inc Full Name (Last, First, Middle Initial) Date of Disbursement A. Hudson Incentives & Imprints Mailing Address 1592 Georgetown Rd. 2016 City State Zip Code Amount of Each Disbursement this Period OH Hudson 44236 Purpose of Disbursement 1661.14 **Event supplies** 001 Transaction ID: SB21A.10891 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General President Other (specify) State: District: Convention Full Name (Last, First, Middle Initial) B. K&D Management Date of Disbursement Mailing Address 09 2016 1621 Euclid Ave. Suite 300 City State Zip Code Amount of Each Disbursement this Period Cleveland ОН 44115 340.64 Purpose of Disbursement Utilities 001 Transaction ID: SB21A.10954 Candidate Name Category/ Type Office Sought: House Disbursement For: 2016 Senate Primary General President X Other (specify) Convention District: State: Full Name (Last, First, Middle Initial) Date of Disbursement C. KeyCorp Mailing Address 127 Public Square 2016 City State Zip Code Amount of Each Disbursement this Period OH Cleveland 44114 600.00 Purpose of Disbursement 001 Credit card payment Transaction ID: SB21A.10999 Candidate Name Category/ Type Office Sought: House Disbursement For: 2016 Senate Primary General President X Other (specify) State: District: Convention 2601.78 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only)

schedule(s) FOR LINE NUMBER: PAGE 21 OF

| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | ck only one) |
|--|---|--|
| Any information copied from such Reports and Statemor for commercial purposes, other than using the name | ents may not be sold or used by an | y person for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) Cleveland 2016 Host Co | ommittee Inc | |
| Full Name (Last, First, Middle Initial) | | |
| A. Kohrman Jackson & Krantz | | Date of Disbursement |
| Mailing Address 1375 East Ninth Street 29th Floor | | 09 30 2016 |
| · · | ate Zip Code | Amount of Each Disbursement this Period |
| | DH 44114 | 450000.00 |
| Purpose of Disbursement Legal services Candidate Name | 001 | Transaction ID : SB21A.10898 |
| Candidate Name | Catego Type | |
| Senate Fresident X | ent For: 2016 Primary General Other (specify) Convention | |
| State: District: Full Name (Last, First, Middle Initial) | Convention | |
| 3. Lola | | Date of Disbursement |
| Mailing Address 2058 East 4th St. | | 09 05 2016 |
| • | ate Zip Code | Amount of Each Disbursement this Period |
| | DH 44115 | 1500.00 |
| Purpose of Disbursement Event/food & beverage | 001 | |
| Candidate Name | Catego Type | |
| Senate F | ent For: 2016 Primary General Other (specify) | |
| State: District: | Convention | |
| Full Name (Last, First, Middle Initial) McDonald Hopkins LLC | | Date of Disbursement |
| Mailing Address 600 Superior Avenue, E. Suite 2100 | | 09 14 2016 |
| • | ate Zip Code | Amount of Each Disbursement this Period |
| Cleveland Purpose of Disbursement Legal services | DH 44114 | 69279.00 |
| Candidate Name | Catego Type | Transaction ID : SB21A.10883 |
| Senate F | ent For: 2016 Primary General Other (specify) Conventior | |
| SUBTOTAL of Disbursements This Page (optional) | | 220779.00 |
| TOTAL This Period (last page this line number only) | | |

| | CHEDULE B (FEC Form 4) EMIZED DISBURSEMENTS | Use separate schedul for each category of the | hè | | NUMBER: ly one) | | | | | PAGE | 22 | OF | 57 |
|---------------|---|---|----------|-------------------|----------------------------|--------|------|----------|-------|--------|---------|-------|-----|
| | | Detailed Summary Page | ge | X 21a | | 2 | | 23a | | 23b | 248 | а | |
| | ly information copied from such Reports and State for commercial purposes, other than using the | | | d by any perso | | | | | | | | | |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | |
| \rangle | Cleveland 2016 Host | Committee In | С | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | | | | | |
| ١. | Miller, Michael, , , | | | | | | Dis | burser | ment | | | | |
| | Mailing Address 406 Willard St. | | | | 1 |)9 | / | 22 | | Y | 2016 | Y | |
| | City | State Zip Code | | | Am | ount | of | Each I | Disbu | ırseme | nt this | Per | iod |
| | Maryville | TN 37803 | | | | | | | | | - | | - |
| | Purpose of Disbursement Media consulting and expense reimbursement | | | 001 | L | | | , | | , | 1195 | 1.56 | |
| | Candidate Name | | - | 001 | Tra | nsad | tio | 1D : S | SB21 | A.1093 | 3 | | |
| | Candidate Name | | | Category/ Type | | | | | | | | | |
| | Office Sought: House Disbu | rsement For: 2016 | | | | | | | | | | | |
| | Senate | Primary Genera | al | | | | | | | | | | |
| | President | Cother (specify) | Conv | ention/ | | | | | | | | | |
| | State: District: Full Name (Last, First, Middle Initial) | | COIII | CHIOH | | | | | | | | | |
| 3. | Miller, Michael, , , | | | | Da | e of | Dis | burser | ment | | | | |
| | | | | | 09 / DD / Y Y Y Y Y Y 2016 | | | | ■ Y | 1 | | | |
| | Mailing Address 406 Willard St. | | | | | | | | | | | | |
| | City | State Zip Code | | | Am | ount | of | Each I | Disbu | ırseme | nt this | Per | iod |
| | Maryville Purpose of Disbursement | TN 37803 | Т | | | | | | | | 11000 | 0.00 | П |
| | Media consulting | | | 001 | Tra | nsa | ctio | n ID · : | SB21 | A.1093 | 33.0 | | |
| | Candidate Name | | | Category/ | x | | | | | | | | |
| | Office County House | 2016 | | Туре | | | | | | | | | |
| | Office Sought: House Disbu | rsement For: 2016 Primary Genera | al | | | | | | | | | | |
| | President | X Other (specify) | •• | | | | | | | | | | |
| | State: District: | | Со | nvention | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | _ | | | | | | | | |
| ٠. | Flannery's Pub | | | | | | Dis | burser | | | | | |
| | Mailing Address 323 Prospect Ave. E | | | | 1 | 09 | _ ′ | 22 | | | 2016 | = Y | |
| | City | State Zip Code | | | Am | ount | of | Each I | Disbu | ırseme | nt this | Per | iod |
| | Cleveland | OH 44115 | | | | | | • | - | | - 01 | - 0.4 | |
| | Purpose of Disbursement Meals 002 | | | | | | | , | _ | , | 65 | 5.64 | |
| | Candidate Name | | \dashv | Category/ | | ansa | ctic | n ID : | SB2 | 1A.109 | 33.1 | | |
| | | | | Type | Х | | | | | | | | |
| | - H | rsement For: 2016 | | | | | | | | | | | |
| | Senate | Primary General | al | | | | | | | | | | |
| | State: President State: | M Other (specify) | Со | nvention | | | | | | | | | |
| | | | | | | | | | | | | _ | |

SUBTOTAL of Disbursements This Page (optional).....

PAGE 23 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the Detailed Summary Page **X** 21a 22 23a

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Cleveland 2016 Host Committee Inc Full Name (Last, First, Middle Initial) Date of Disbursement A. Heinen's Mailing Address 900 Euclid Ave. 22 2016 City State Zip Code Amount of Each Disbursement this Period OH Cleveland 44115 Purpose of Disbursement 44.16 Meals 002 Transaction ID: SB21A.10933.2 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General President Other (specify) State: District: Convention Full Name (Last, First, Middle Initial) **B.** CVS Pharmacy Date of Disbursement Mailing Address 840 Euclid Ave 09 2016 City State Zip Code Amount of Each Disbursement this Period Cleveland ОН 44114 14.47 Purpose of Disbursement 002 Meals Transaction ID: SB21A.10933.3 Candidate Name Category/ Type Office Sought: House Disbursement For: 2016 Senate Primary General President X Other (specify) Convention District: State: Full Name (Last, First, Middle Initial) Date of Disbursement C. Harry Buffalo Mailing Address 2120 East 4th Street 2016 City State Zip Code Amount of Each Disbursement this Period OH Cleveland 44115 16.50 Purpose of Disbursement 002 Meals Transaction ID: SB21A.10933.5 Candidate Name Category/ X Type Office Sought: House Disbursement For: 2016 Senate Primary General President X Other (specify) State: District: Convention 0.00 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only)

| SCHEDULE B TEMIZED DISE | • | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE (check only | • |
|--|----------------------------|---|----------------------|---|
| | | | d by any perso | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMIT | TEE (In Full) | | | |
| $^{ angle}$ Clevelan | d 2016 Hos | t Committee Inc | | |
| Full Name (Last, Fi | st, Middle Initial) | | | Date of Disbursement |
| A. Hodge's | | | | M M / D D / Y Y Y Y |
| Mailing Address 66 | 8 Euclid Ave | | | 09 22 2016 |
| City | | State Zip Code | | Amount of Each Disbursement this Period |
| Cleveland Purpose of Disburs | noment. | OH 44114 | | 17.38 |
| Meals | ement | | 002 | Transaction ID : SB21A.10933.6 |
| Candidate Name | | | Category/ Type | X |
| Office Sought: | House Dis Senate President | bursement For: 2016 Primary General X Other (specify) | | |
| | District: | Conv | ention | |
| Full Name (Last, Fire Address) Mailing Address 66 | rst, Middle Initial) | | | Date of Disbursement Op 22 2016 |
| | Do Eucliu Ave | | | |
| City Cleveland | | State Zip Code OH 44114 | | Amount of Each Disbursement this Period |
| Purpose of Disburs | ement | | | 64.52 |
| Meals | | | 002 | Transaction ID : SB21A.10933.7 |
| Candidate Name | | | Category/ Type | X |
| Office Sought: | House Dis | bursement For: 2016 Primary General | | |
| | President | X Other (specify) | | |
| State: D | District: | | nvention | |
| Full Name (Last, Fine Miller, Michael | • | | | Date of Disbursement |
| Mailing Address 40 | | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | | State Zip Code | | Amount of Each Disbursement this Period |
| Maryville | | TN 37803 | | Amount of Each Disbursement this Period |
| Purpose of Disburs Milage reimburseme | | | 002 | 275.40 |
| Candidate Name | 51 IL | | Category/ Type | Transaction ID : SB21A.10933.8 X |
| Office Sought: | | bursement For: 2016 | iype | |
| | Senate President | Primary General X Other (specify) | | |
| State: D | District: | | nvention | |
| | | | | |

SUBTOTAL of Disbursements This Page (optional).....

| III | nage# 201610149032489094 | | | |
|-----------|--|--|--------------------------|---|
| | CHEDULE B (FEC Form 4) EMIZED DISBURSEMENTS | Use separate schedule(s for each category of the Detailed Summary Page | FOR LINE (check onl | NUMBER: PAGE 25 OF 57 y one) 22 23a 23b 24a |
| | ny information copied from such Reports and Statem for commercial purposes, other than using the nam | | ed by any pers | on for the purpose of soliciting contributions |
| \rangle | NAME OF COMMITTEE (In Full) Cleveland 2016 Host Co | ommittee Inc | | |
| ۹. | Full Name (Last, First, Middle Initial) Heinen's | | | Date of Disbursement |
| | Mailing Address 900 Euclid Ave. | | | 09 22 2016 |
| | Cleveland | State Zip Code OH 44115 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Meals Candidate Name | | 002 Category/ Type | 91.49 Transaction ID : SB21A.10933.9 X |
| | Senate President | nent For: 2016 Primary General Other (specify) | | |
| | State: District: Full Name (Last, First, Middle Initial) | Cor | vention | |
| 3. | Hodge's Mailing Address 668 Euclid Ave | | | Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Cleveland Purpose of Disbursement | State Zip Code OH 44114 | 200 | Amount of Each Disbursement this Period 20.72 |
| | Meals Candidate Name | | 002 Category/ Type | Transaction ID : SB21A.10933.10 X |
| | Senate | nent For: 2016 Primary General Other (specify) | onvention | |
| С. | Full Name (Last, First, Middle Initial) Miller, Michael, , , | | | Date of Disbursement |
| | Mailing Address 406 Willard St. | | | 09 22 2016 |
| | Maryville | State Zip Code TN 37803 | | Amount of Each Disbursement this Period 275.40 |
| | Purpose of Disbursement Milage reimbursement Candidate Name | | 002 Category/ | Transaction ID : SB21A.10933.11 |
| | | nent For: 2016 Primary General | Туре | |

FEC Schedule B (Form 4) (Revised 1/01)

President

District:

X Other (specify)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only)

Convention

0.00

State:

schedule(s) FOR LINE NUMBER: PAGE 26 OF

| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page (check only) | one) 22 23a 23b 24a |
|---|--|---|
| Any information copied from such Reports and Statem or for commercial purposes, other than using the name | ents may not be sold or used by any perso | |
| NAME OF COMMITTEE (In Full) | | |
| $^{ angle}$ Cleveland 2016 Host Co | ommittee Inc | |
| Full Name (Last, First, Middle Initial) | | Data of Diahuma and |
| A. Mitchell's Ice Cream | | Date of Disbursement |
| Mailing Address 1867 West 25th Street | | 09 14 2016 |
| City | tate Zip Code | Amount of Each Disbursement this Period |
| | DH 44113 | 1001.00 |
| Purpose of Disbursement Catering | 001 | 4034.00 |
| Candidate Name | Category/ | Transaction ID : SB21A.10868 |
| | Type | |
| | ent For: 2016 | |
| | Primary General | |
| State: District: | Other (specify) Convention | |
| Full Name (Last, First, Middle Initial) | | |
| B. Moon, Tim, , , | | Date of Disbursement |
| | | M M / D D / Y Y Y Y Y |
| Mailing Address 2017 Reveley Ave. | | 09 06 2016 |
| City S | tate Zip Code | Amount of Each Disbursement this Period |
| | DH 44107 | |
| Purpose of Disbursement Event/entertainment | 001 | 350.00 |
| Candidate Name | Category/ | Transaction ID : SB21A.10872 |
| | Type | |
| | ent For: 2016 | |
| | Primary General | |
| State: District: | Other (specify) Convention | |
| Full Name (Last, First, Middle Initial) | | |
| National Construction Rentals | | Date of Disbursement |
| Martina Addina | | M M / D D / Y Y Y Y Y |
| Mailing Address 2177 McKinley Ave. | | 09 05 2016 |
| · · · | tate Zip Code | Amount of Each Disbursement this Period |
| | DH 43204 | 4009.00 |
| Purpose of Disbursement Construction | 001 | 4908.00 |
| Candidate Name | Category/ | Transaction ID : SB21A.11046 |
| | Type | |
| | ent For: 2016 | |
| | Primary General | |
| State: District: | Other (specify) Convention | |
| 2.5 | | |
| SUBTOTAL of Disbursements This Page (optional) | | 9292.00 |
| | | |
| TOTAL This Period (last page this line number only). | | |

| | Use separate schedule(s) for each category of the Detailed Summary Page | | LINE ck only | | | | 23a | | PAG 23b | E | 27 OF | 57 |
|---|---|--|-----------------|--|--|--|-----|--|------------|---|-------|----|
| tatements may not be sold or used by any person for the purpose of soliciting contributions name and address of any political committee to solicit contributions from such committee. | | | | | | | | | | | | |
| Committee Inc | | | | | | | | | | | | |

| | Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | | | | |
|--------------|--|-----------------------------------|---|---|--|--|--|
| | NAME OF COM | //ITTEE (In Full) | _ | | | | |
| | | nd 2016 Host Committee Inc | | | | | |
| ۸ | , | First, Middle Initial) | Balance Birthaman in | | | | |
| Α. | Nuevo Mod | ern Mexican & Tequila Bar | | Date of Disbursement | | | |
| | Mailing Address | 1000 E. 9th St. | | 09 13 2016 | | | |
| | City | State Zip Code | | Amount of Each Disbursement this Period | | | |
| | Cleveland | OH 44114 | | | | | |
| | Purpose of Disb Event/venue ren | | 001 | 25000.00 | | | |
| | Candidate Name | | Transaction ID : SB21A.10900 | | | | |
| | Canadato Hamo | | Category/ Type | | | | |
| | Office Sought: | House Disbursement For: | | | | | |
| | | Senate Primary General | | | | | |
| | 01-1- | President Other (specify) | | | | | |
| | State: | District: First, Middle Initial) | | | | | |
| B. | Paycor | riist, Middle Illittat) | | Date of Disbursement | | | |
| | 1 ayooi | | | M M / D D / Y Y Y Y | | | |
| | Mailing Address | 3 Summit Park Dr #300 | 09 14 2016 | | | | |
| | City | State Zip Code | Amount of Each Disbursement this Period | | | | |
| | Independence | OH 44131 | | Amount of Each Dispulsement this Feriod | | | |
| | Purpose of Disb | ursement | 200 | 1760.13 | | | |
| | Payroll | | 001 | Transaction ID : SB21A.10901 | | | |
| | Candidate Name | | Category/ Type | | | | |
| | Office Sought: | House Disbursement For: 2016 | | | | | |
| | | Senate Primary General | | | | | |
| | 0 | President | 'any contion | | | | |
| | State: | 2.00.100.1 | onvention | | | | |
| C | • • | First, Middle Initial) | | Date of Disbursement | | | |
| ٠. | Paycor | | | M M / D D / Y Y Y Y | | | |
| | Mailing Address | 3 Summit Park Dr #300 | 09 14 2016 | | | | |
| | City | State Zip Code | | Amount of Each Disbursement this Period | | | |
| | Independence | OH 44131 | | 783.09 | | | |
| | Purpose of Disb Payroll taxes | ursement | 763.09 Transaction ID : SB21A.10902 | | | | |
| | Candidate Name | | Transaction is . OSETATOOCE | | | | |
| | Office Sought: | House Disbursement For: 2016 | Type | | | | |
| | - | Senate Primary General | | | | | |
| | | President | | | | | |
| | State: | District: C | Convention | | | | |
| _ ا | | | | 27543.22 | | | |
| \vdash^{s} | SUBTOTAL of Disk | oursements This Page (optional) | | | | | |
| _ | OTAL This Period | (last page this line number only) | | | | | |
| L. | | (r9- and mid-man-ser-ser-j) | | 7 | | | |

schedule(s) FOR LINE NUMBER: PAGE 28 OF

| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page (check only | y one) |
|---|---|---|
| Any information copied from such Reports and State or for commercial purposes, other than using the nar | ments may not be sold or used by any person | |
| NAME OF COMMITTEE (In Full) | | |
| Cleveland 2016 Host C | committee Inc | |
| Full Name (Last, First, Middle Initial) A. Paycor | | Date of Disbursement |
| Mailing Address 3 Summit Park Dr #300 | | 09 / 15 / 2016 |
| City | State Zip Code OH 44131 | Amount of Each Disbursement this Period |
| Independence Purpose of Disbursement Powell processing foce | | 49.90 |
| Payroll processing fees Candidate Name | 001 Category/ | Transaction ID : SB21A.10905 |
| Senate President State: District: | Type ement For: 2016 Primary General Other (specify) Convention | |
| Full Name (Last, First, Middle Initial) 3. Paycor | | Date of Disbursement |
| Mailing Address 3 Summit Park Dr #300 | | 09 / 30 / 2016 |
| City Independence | State Zip Code OH 44131 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Payroll | 001 | 1760.13 |
| Candidate Name | Category/ Type | Transaction ID: SB21A.10903 |
| Office Sought: House Senate President Disburse | ement For: 2016 Primary General Other (specify) | |
| State: District: | Convention | |
| Full Name (Last, First, Middle Initial) - Paycor | | Date of Disbursement |
| Mailing Address 3 Summit Park Dr #300 | | 09 30 2016 |
| City Independence | State Zip Code OH 44131 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Payroll taxes | 783.09 | |
| Candidate Name | Transaction ID : SB21A.10904 | |
| Office Sought: House Senate President State: Disburse | ment For: 2016 Primary General Other (specify) Convention | |
| , | | 2593.12 |
| SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only | | |
| INTE THIS I CHOW (IASE PAYE WITS THE HUTTING OTHY | J | |

| lmage# 201610149032489098 | | | | | | | |
|--|---|--------------------------|---------------------------|----|--|--|--|
| SCHEDULE B (FEC Form 4) TEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE (check only | | 57 | | | |
| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Cleveland 2016 Host Committee Inc | | | | | | | |
| Warrensville Heights Purpose of Disbursement Event/food & beverage Candidate Name Office Sought: House Senate President State: District: | | 001 Category/ Type | Date of Disbursement M | od | | | |
| Full Name (Last, First, Middle Initial) 3. Pre-Ferd, LLC | | | Date of Disbursement | | | | |

| Studio #7 | | | | | | | |
|---|-------------------------|------------|---|--|--|--|--|
| City | State Zip Code | | Amount of Each Disbursement this Period | | | | |
| Warrensville Heights | OH 44128 | | | | | | |
| Purpose of Disbursement | | | 28200.00 | | | | |
| Event/food & beverage | | 001 | Transaction ID : SB21A.11065 | | | | |
| Candidate Name | | Category/ | | | | | |
| | | Type | | | | | |
| Office Sought: House | Disbursement For: | | | | | | |
| Senate | Primary Gener | ral | | | | | |
| President | Other (specify) | | | | | | |
| State: District: | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | |
| Pre-Ferd, LLC | | | Date of Disbursement | | | | |
| | | | M = M / D = D / Y = Y = Y | | | | |
| Mailing Address 8353 Mentor Ave. | | | 09 06 2016 | | | | |
| City | State Zip Code | | Amount of Each Disbursement this Period | | | | |
| Mentor | OH 44060 | | | | | | |
| Purpose of Disbursement | | 204 | 2674.00 | | | | |
| Janitorial service | | 001 | Transaction ID : SB21A.10918 | | | | |
| Candidate Name | | Category/ | | | | | |
| | | Туре | | | | | |
| Office Sought: House | Disbursement For: 2016 | | | | | | |
| Senate | Primary Gener | ral | | | | | |
| President | X Other (specify) | | | | | | |
| State: District: | | Convention | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | |
| PSAV Presentation Servior | es | | Date of Disbursement | | | | |
| | | | M M / D D / Y Y Y Y | | | | |
| Mailing Address 300 Lakeside Ave. E | | | 09 16 2016 | | | | |
| City | State Zip Code | | Amount of Each Disbursement this Period | | | | |
| Cleveland | OH 44114 | | | | | | |
| Purpose of Disbursement | Purpose of Disbursement | | | | | | |
| Technology support | | 001 | Transaction ID : SB21A.11066 | | | | |
| Candidate Name | | Category/ | Transaction ib . 352 FA. 11000 | | | | |
| | | Type | | | | | |
| Office Sought: House | Disbursement For: 2016 | | | | | | |
| Senate | Primary Gener | ral | | | | | |
| President | X Other (specify) | | | | | | |
| State: District: | | Convention | | | | | |
| | | | 24504.00 | | | | |
| SUBTOTAL of Disbursements This Page | e (optional) | | 31594.00 | | | | |
| | | | | | | | |
| TOTAL This Period (last page this line I | number only) | | | | | | |

FEC Schedule B (Form 4) (Revised 1/01)

| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: PAGE 30 (check only one) | | | | | | 30 OF | 57 | | | |
|---|--|---|-----|--|----|--|-----|-------|-----|--|-----|--|
| Detailed Sulfilliary Fage | | X | 21a | | 22 | | 23a | | 23b | | 24a | |
| ents may not be sold or used by any person for the purpose of soliciting contributions and address of any political committee to solicit contributions from such committee. | | | | | | | | | | | | |

Any information copied from such Reports and Stateme or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Cleveland 2016 Host Committee Inc Full Name (Last, First, Middle Initial) Date of Disbursement A. Red Maverick Media LLC Mailing Address 403 N. Second Street 06 2016 City State Zip Code Amount of Each Disbursement this Period PΑ Harrisburg 17101 59500.00 Purpose of Disbursement Fundraising commission 003 Transaction ID: SB21A.10844 Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Senate Primary General President X Other (specify) Convention State: District: Full Name (Last, First, Middle Initial) **B.** Residence Inn by Marriott Date of Disbursement Mailing Address 527 Prospect Ave 09 2016 City Zip Code State Amount of Each Disbursement this Period Cleveland ОН 44115 Purpose of Disbursement 205873.30 002 Lodging Transaction ID: SB21A.10932 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General President X Other (specify) Convention State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Secavec, Inc. Mailing Address 405 S Dale Mabry Hwy 2016 ste 376 City State Zip Code Amount of Each Disbursement this Period Tampa 33609 4715.58 Purpose of Disbursement 002 Travel expense reimbursement Transaction ID: SB21A.10964 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General President X Other (specify) State: District: Convention 270088.88 SUBTOTAL of Disbursements This Page (optional).....

FEC Schedule B (Form 4) (Revised 1/01)

PAGE 31 OF FOR LINE NUMBER:

| TI | EMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | (check only | y one) | | |
|-----------|--|---|--------------------------|--|--|--|
| | y information copied from such Reports and Statem for commercial purposes, other than using the name | | | | | |
| \rangle | NAME OF COMMITTEE (In Full) Cleveland 2016 Host Co | ommittee Inc | | | | |
| ١. | Fort Worth Purpose of Disbursement Airfare Candidate Name Office Sought: House Disbursem | State Zip Code TX 76155 nent For: 2016 | 002 Category/ Type | Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | President State: District: Full Name (Last, First, Middle Initial) | Primary General Other (specify) Con | vention | | | |
| | Uber Technologies Mailing Address 1455 Market St | | | Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | San Francisco Purpose of Disbursement Transportation Candidate Name Office Sought: House Disbursem Senate | ctate Zip Code CA 94102 The primary General Other (specify) | 002 Category/ Type | Amount of Each Disbursement this Period 167.65 Transaction ID: SB21A.10964.1 X | | |
| | State: District: | | onvention | | | |
| · · | Cleveland Purpose of Disbursement Meals Candidate Name Office Sought: House Senate President Variable Va | State Zip Code OH 44114 nent For: 2016 Primary General Other (specify) | 002 Category/ Type | Date of Disbursement M M M / 29 / 2016 Amount of Each Disbursement this Period 45.76 Transaction ID: SB21A.10964.9 X | | |
| | State: District: | C | onvention | | | |
| | SUBTOTAL of Disbursements This Page (optional) | | | | | |

| SCHEDULE B (FEC Form 4) TEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBE (check only one) | R: PAGE 32 OF 57 | | | |
|--|---|---------------------------------|--------------------------------------|--|--|--|
| Any information copied from such Reports and Stater or for commercial purposes, other than using the nan | | by any person for the | purpose of soliciting contributions | | | |
| NAME OF COMMITTEE (In Full) | | | | | | |
| Cleveland 2016 Host C | ommittee Inc | | | | | |
| Full Name (Last, First, Middle Initial) A. Residence Inn by Marriott | Full Name (Last, First, Middle Initial) Residence Inn by Marriott | | | | | |
| Mailing Address 527 Prospect Ave | | 09 | 29 2016 | | | |
| City Cleveland | State Zip Code OH 44115 | Amou | nt of Each Disbursement this Period | | | |
| Purpose of Disbursement Lodging | | 002 Trans | 557.37 action ID : SB21A.10964.11 | | | |
| Candidate Name | - | Category/ Type | uolion 15 . 552 / A. 1666-4. 1 1 | | | |
| Senate President | ment For: 2016 Primary General Other (specify) | | | | | |
| State: District: Full Name (Last, First, Middle Initial) | Conve | ntion | | | | |
| Mailing Address 1440 New York Ave. NW | Flom LLP | Date 09 | | | | |
| , | State Zip Code | Amou | nt of Each Disbursement this Period | | | |
| Washington Purpose of Disbursement | DC 20005 | | 2574.45 | | | |
| Legal services Candidate Name | | Category/ | saction ID : SB21A.10870 | | | |
| Office Sought: House Disburse Senate President | ment For: 2016 Primary General Other (specify) | Туре | | | | |
| State: District: | | vention | | | | |
| Full Name (Last, First, Middle Initial) Standard Parking | | Date | of Disbursement | | | |
| Mailing Address 8037 Collection Center Dr | | 09 | | | | |
| City Chicago | State Zip Code IL 60693 | Amou | nt of Each Disbursement this Period | | | |
| Purpose of Disbursement Parking Candidate Name | | 001 Tran | 680.00 saction ID : SB21A.10955 | | | |
| Office Cought: House By | | Type | | | | |
| Office Sought: House Disburse Senate President | ment For: 2016 Primary General Other (specify) | | | | | |
| State: District: | | vention | | | | |
| | | | 3254.45 | | | |

SUBTOTAL of Disbursements This Page (optional).....

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

| | ny information copied from such Reports and Statements may not be sold or use for commercial purposes, other than using the name and address of any political | | |
|-----------|---|-------------------|--|
| $\sqrt{}$ | NAME OF COMMITTEE (In Full) | | |
| / | Cleveland 2016 Host Committee Inc | | |
| Α. | Full Name (Last, First, Middle Initial) State of Ohio Department of Transportation | | Date of Disbursement |
| | Mailing Address 5500 Transportation Blvd | | 09 07 2016 |
| | City State Zip Code Garfield Heights OH 44125 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Transportation | 001 | 315884.16 Transaction ID : SB21A.10961 |
| | Candidate Name | Category/ Type | |
| | Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) | | |
| | State: District: Con Full Name (Last, First, Middle Initial) | vention | |
| В. | State of Ohio Department of Transportation | | Date of Disbursement |
| | Mailing Address 5500 Transportation Blvd | | 09 27 2016 |
| | City State Zip Code Garfield Heights OH 44125 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Transportation | 001 | 101223.22 Transaction ID : SB21A.10963 |
| | Candidate Name | Category/ Type | |
| | Office Sought: House Senate President Disbursement For: 2016 Primary General **Other (specify) | | |
| | Ciate. Biolifet. | onvention | |
| C. | Full Name (Last, First, Middle Initial) Taylor Oswald LLC | | Date of Disbursement |
| | Mailing Address 1100 Superior Ave. E | | 09 08 2016 |
| | City State Zip Code Cleveland OH 44114 | | Amount of Each Disbursement this Period 11890.00 |
| | Purpose of Disbursement Insurance | 001 | |
| | Candidate Name | Category/ Type | Transaction ID : SB21A.10881 |
| | Office Sought: House Senate Primary Other (specify) Disbursement For: 2016 Primary General | | |
| | State: District: Co | onvention | |
| s | SUBTOTAL of Disbursements This Page (optional) | <u></u> | 428997.38 |
| т | OTAL This Period (last page this line number only) | | |

| Image# 201610149032489103 | | | | | |
|---|---|-------------------|-----------------------------|----------------------|--|
| SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | (check only | | | |
| | | X 21a | | 23b 24a | |
| Any information copied from such Reports and Staten or for commercial purposes, other than using the nam | | | | | |
| NAME OF COMMITTEE (In Full) | le and address of any political | Committee to | SOIICIT CONTINUUTIONS TOTAL | such committee. | |
| Cleveland 2016 Host C | ommittee Inc | | | | |
| Full Name (Last, First, Middle Initial) | | | | | |
| A. Taylor Oswald LLC | | | Date of Disbursement | | |
| Mailing Address 1100 Superior Ave. E | 09 / 08 | 2016 | | | |
| City | State Zip Code | | Amount of Each Disbu | ursement this Period | |
| Cleveland | OH 44114 | | and an easily bloom | and I dridd | |
| Purpose of Disbursement | | | | 97690.00 | |
| Insurance | | 001 | Transaction ID : SB21 | A.11108 | |
| Candidate Name | | Category/ Type | | | |
| Office Sought: House Disburser | ment For: 2016 | туре | | | |
| | Primary General | | | | |
| | Other (specify) | | | | |
| State: District: | Conve | ention | | | |
| Full Name (Last, First, Middle Initial) | | | | | |
| 3. Taylor Oswald LLC | | | Date of Disbursement | | |
| Mailing Address 1100 Superior Ave. E | | | 09 / 19 | 2016 | |
| City | State Zip Code | | Amount of Each Disbu | ursement this Period | |
| Cleveland | OH 44114 | | 7 tillodik of Edolf Blobs | arcoment the Ferred | |
| Purpose of Disbursement | | 004 | | 12695.00 | |
| Insurance | | 001 | Transaction ID : SB2 | 1A.10894 | |
| Candidate Name | | Category/ Type | | | |
| Office Sought: House Disburser | ment For: 2016 | 1900 | | | |
| | Primary General | | | | |
| | Other (specify) | | | | |
| State: District: | Con | vention | | | |
| Full Name (Last, First, Middle Initial) | | | | | |
| The Endicott Group | | | Date of Disbursement | | |
| Mailing Address 209 Pennsylvania Ave SE | | | 09 / D D 07 | 2016 | |
| City | State Zip Code | | Amount of Each Disbu | ursament this Dariad | |
| • | DC 20003 | | Amount of Lacif Disbi | arsoment uns Fenou | |
| Purpose of Disbursement Fundraising commission | Г | 003 | L, | 120000.00 | |
| Candidate Name | | | Transaction ID : SB2 | 1A.10835 | |
| Canadate Manie | 1 | Category/ | | | |

230385.00 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only)

General

Disbursement For: 2016

Primary

X Other (specify)

Category/ Type

Convention

House Senate

District:

President

State:

Office Sought:

schedule(s) FOR LINE NUMBER: PAGE 35 OF 57

| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page (check only 21a | y one) | | | | |
|--|--|--|--|--|--|--|
| | Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | | | |
| NAME OF COMMITTEE (In Full) Cleveland 2016 Host Co | ommittee Inc | | | | | |
| | | | | | | |
| Full Name (Last, First, Middle Initial) Transportation Management Service | es | Date of Disbursement | | | | |
| Mailing Address 17810 Meetinghouse Road 200 | | 09 05 2016 | | | | |
| , | ate Zip Code MD 20860 | Amount of Each Disbursement this Period | | | | |
| Purpose of Disbursement Consulting/transportation | 001 | 39510.80 Transaction ID : SB21A.11067 | | | | |
| Candidate Name | Category/ Type | | | | | |
| Senate F | ent For: 2016 Primary General Other (specify) Convention | | | | | |
| Full Name (Last, First, Middle Initial) | 223 | | | | | |
| 3. Union Club of Cleveland | | Date of Disbursement | | | | |
| Mailing Address 1211 Euclid Ave | | 09 20 2016 | | | | |
| • | ate Zip Code | Amount of Each Disbursement this Period | | | | |
| | OH 44115-1865 | 4002.20 | | | | |
| Purpose of Disbursement Lodging & meals | 001 | 1863.38 | | | | |
| Candidate Name | Category/ Type | Transaction ID : SB21A.10956 | | | | |
| Senate F | ent For: 2016 Primary General Other (specify) | | | | | |
| State: District: | Convention | | | | | |
| Full Name (Last, First, Middle Initial) UPS | | Date of Disbursement | | | | |
| Mailing Address lockbox 577 | | 09 20 2016 | | | | |
| • | ate Zip Code | Amount of Each Disbursement this Period | | | | |
| Carol Stream Purpose of Disbursement | L 60132-0577 | 131.89 | | | | |
| Shipping | 001 | | | | | |
| Candidate Name | Category/ Type | Transaction ID : SB21A.10957 | | | | |
| Senate F | ent For: 2016 Primary General Other (specify) Convention | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | 41506.07 | | | | |
| TOTAL This Period (last page this line number only) | | | | | | |

PAGE 36 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the Detailed Summary Page **X** 21a 22 23a

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Cleveland 2016 Host Committee Inc Full Name (Last, First, Middle Initial) Date of Disbursement A. Vend-All Inc. Mailing Address 1743 E 17th St. 06 2016 City State Zip Code Amount of Each Disbursement this Period OH Cleveland 44114 Purpose of Disbursement 26.00 Coffee/water 001 Transaction ID: SB21A.10922 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General President Other (specify) State: District: Convention Full Name (Last, First, Middle Initial) B. Vend-All Inc. Date of Disbursement Mailing Address 1743 E 17th St. 09 2016 City State Zip Code Amount of Each Disbursement this Period Cleveland ОН 44114 563.95 Purpose of Disbursement Coffee/water 001 Transaction ID: SB21A.10958 Candidate Name Category/ Type Office Sought: House Disbursement For: 2016 Senate Primary General President X Other (specify) Convention District: State: Full Name (Last, First, Middle Initial) Date of Disbursement C. Vertical Sound Mailing Address 1945 W. 74th St. 2016 City State Zip Code Amount of Each Disbursement this Period OH Cleveland 44102 520.00 Purpose of Disbursement 001 Event/stage Transaction ID: SB21A.10876 Candidate Name Category/ Type Office Sought: House Disbursement For: 2016 Senate Primary General President X Other (specify) State: District: Convention 1109.95 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only)

schedule(s) FOR LINE NUMBER: PAGE 37 OF 57

| TEMIZED DISBURSEMENTS Ose separate schedule(s) for each category of the Detailed Summary Page | | | |
|--|-----------------------------|---|--|
| Any information copied from such Reports and Statem or for commercial purposes, other than using the nam | | | |
| NAME OF COMMITTEE (In Full) | | | |
| $^{ angle}$ Cleveland 2016 Host Co | ommittee Inc | | |
| Full Name (Last, First, Middle Initial) | | | |
| W.B. Mason Co., Inc. | | Date of Disbursement | |
| Mailing Address 59 Centre Street | | 09 16 7 2016 | |
| City | state Zip Code | Amount of Each Disbursement this Period | |
| | MA 02301 | | |
| Purpose of Disbursement Office supplies | 001 | 76.77 | |
| Candidate Name | Category/ | Transaction ID : SB21A.11068 | |
| | Туре | | |
| | nent For: 2016 | | |
| | Primary General | | |
| State: District: | Other (specify) Convention | | |
| Full Name (Last, First, Middle Initial) | 2 3 | | |
| 3. W.B. Mason Co., Inc. | | Date of Disbursement | |
| · | | M M / D D / Y Y Y Y | |
| Mailing Address 59 Centre Street | | 09 16 2016 | |
| City | state Zip Code | Amount of Each Disbursement this Period | |
| • | MA 02301 | Amount of Each Dispulsement this Fellod | |
| Purpose of Disbursement | | 64.98 | |
| Office supplies | 001 | Transaction ID : SB21A.11069 | |
| Candidate Name | Category/ Type | | |
| Office Sought: House Disbursen | nent For: 2016 | | |
| | Primary General | | |
| | Other (specify) | | |
| State: District: | Convention | | |
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | |
| Zenith Systems, LLC | | M M / D D / Y Y Y Y | |
| Mailing Address 5055 Corbin Drive | | 09 21 2016 | |
| • | tate Zip Code | Amount of Each Disbursement this Period | |
| | OH 44128 | 1323.36 | |
| Purpose of Disbursement Electrical work | 001 | 1323.36 | |
| Candidate Name | Category/ | Transaction ID : SB21A.10959 | |
| | Type | | |
| Office Sought: House Disbursen | nent For: 2016 | | |
| | Primary General | | |
| | Other (specify) Convention | | |
| State: District: | Convention | | |
| SUBTOTAL of Disbursements This Page (optional) | | 1465.11 | |
| O- (-1 - 2) · · · · | | 0700455 00 | |
| TOTAL This Period (last page this line number only). | | 2792455.28 | |

PAGE 38 OF (Use separate

| DE | BTS AND OBLIGATIONS | | schedule(s) for each | FOR LINE NUMBER: (check only one) | x 9 |
|----|--|----------------------|-------------------------|---|------------|
| | cluding Loans | | numbered line) | | 10 |
| | AME OF COMMITTEE (In Full) | | | | |
| | Cleveland 2016 Host Comr | mittee Inc | | | |
| | A. Full Name (Last, First, Middle Initial) of Debtor (| or Creditor | | ebt (Purpose): | |
| | CORT Furniture | | Furniture d | eposits | |
| | Mailing Address 4698 Great Northern Blvd | | | | |
| | City State North Olmstead | Zip Code OH 44070 | | | |
| | Outstanding Balance Beginning This Period | | Transacti | on ID : SD9.10769 | |
| | 12149.15 | | | | |
| | Amount Incurred This Period | Doumont This Pariod | Outstandi | na Palanas at Class of T | hia Dariad |
| | | Payment This Period | Outstandii | ng Balance at Close of T | |
| | 0.00 | 12149. | 15 | , , , , , , , , , , , , , , , , , , , | 0.00 |
| | B. Full Name (Last, First, Middle Initial) of Debtor o | r Creditor | Nature of D | ebt (Purpose): | |
| | , | | | , , , | |
| | Mailian Address | | | | |
| | Mailing Address | | | | |
| | City State | Zip Code | | | |
| | Outstanding Balance Beginning This Period | | | | |
| | Amount Incurred This Period | Payment This Period | Outstandir | ng Balance at Close of T | his Period |
| | | , , | تنا لنا | , , | |
| | C. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of D | ebt (Purpose): | |
| | | | | | |
| | Mailing Address | | | | |
| | City | State Zip Code | | | |
| | Outstanding Balance Beginning This Period | | 1 | | |
| | | | | | |
| | Amount Incurred This Period | Payment This Period | Outstandir | ng Balance at Close of T | his Period |
| | | | | | |
| | | , , | | , | |
| | | | | | 0.00 |
| 1) | SUBTOTALS This Period This Page (optional) | | | | 0.00 |
| 2) | TOTALS This Period (last page this line number or | nly) | | | 0.00 |
| | | | | | |

FEC Schedule D (Form 4) (Revised 1/01)

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

(Use separate schedule(s)

PAGE 39 OF FOR LINE NUMBER:

57

| DEBTS AND OBLIGATIONS | for each | (check only one) | | 9 |
|-----------------------|----------------|------------------|---|----|
| Excluding Loans | numbered line) | | × | 10 |
| | | | | |

| NAME OF COMMITTEE (In Full) Cleveland 2016 Host Com | mittee Inc | |
|---|-------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor 308 Euclid LTD | r or Creditor | Nature of Debt (Purpose): Parking |
| Mailing Address P.O. Box 14100 | | |
| City State Cleveland | Zip Code OH 44114 | |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.10584 |
| 82.50 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| -50.00 | 32.50 | 0.00 |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): Repairs |
| Action Door | | |
| Mailing Address 201 E Granger Rd | | |
| City State Brooklyn Hts | Zip Code OH 44131 | |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.10574 |
| 606.25 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 606.25 | 0.00 |
| C. Full Name (Last, First, Middle Initial) of Debto | r or Creditor | Nature of Debt (Purpose): Office supplies |
| Adcom | | Cine supplies |
| Mailing Address 1370 West 6th Street 3rd Floor | | |
| City Cleveland | State Zip Code OH 44113 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.10585 |
| 780.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 780.00 | 0.00 |
| 1) SUBTOTALS This Period This Page (optional) | | 0.00 |
| 2) TOTALS This Period (last page this line number | only) | |
| 2) TOTAL CUITOTANDING LOANS (| | |
| 3) TOTAL OUTSTANDING LOANS from Schedule (| C (last page only) | |

(Use separate schedule(s)

PAGE 40 OF FOR LINE NUMBER:

57

| | BIS AND OBLIGATIONS | | | r each | (check only one) | | 9 |
|---|---|----------------------|-----------------------------|--|---|----------|-----------|
| | luding Loans | | num | pered line) | | × | 10 |
| | ME OF COMMITTEE (In Full) | | | | | | |
| <u> </u> | leveland 2016 Host Comr | nittee inc | | | | | |
| | A. Full Name (Last, First, Middle Initial) of Debtor of | or Creditor | | | ebt (Purpose): g consulting | | |
| | BlueBonnett Fundraising | | | runuraisin | g consulting | | |
| f | Mailing Address 3300 Bee Caves Road #650-1151 | | | | | | |
| - | 0.1 | 7: 0 ! | | | | | |
| | City State Austin | Zip Code TX 78746 | | | | | |
| Ī | Outstanding Balance Beginning This Period | | | Transacti | on ID : SD10.11085 | | |
| | 0.00 | | | | | | |
| | | Daymant This Davied | | 0 | an Balanca et Class et | : Th:- 1 | اد ماد ما |
| | Amount Incurred This Period | Payment This Period | - | Outstandir | ng Balance at Close of | | |
| | 25000.00 | 0.0 | 00 | | 25 | 000.00 | , |
| ŀ | B. Full Name (Last, First, Middle Initial) of Debtor o | r Creditor | | Nature of D | ebt (Purpose): | | |
| | BP | | | Fuel | | | |
| ŀ | Mailing Address P.O. Box 923928 | | | | | | |
| | F.O. Box 923926 | | | | | | |
| | City State Norcross | Zip Code GA 30010 | | | | | |
| ł | | GA 30010 | | | · ID OD4044000 | | |
| Outstanding Balance Beginning This Period | | | Transaction ID : SD10.11086 | | | | |
| | 0.00 | | | | | | |
| | Amount Incurred This Period | Payment This Period | - | Outstandir | ng Balance at Close of | This F | eriod |
| | 2017.56 | 0.0 | 00 | | | 017.56 | |
| ŀ | C. Full Name (Last, First, Middle Initial) of Debtor (| or Creditor | | Nature of D | ebt (Purpose): | | |
| | City of Cleveland, Ohio | or Orcator | | Parking | (· | | |
| | <u> </u> | | | | | | |
| | Mailing Address 601 Lakeside Ave Room 127 | | | | | | |
| ı | City | State Zip Code | | | | | |
| - | Cleveland | OH 44114 | | | | | |
| | Outstanding Balance Beginning This Period | | | Transact | ion ID : SD10.10606 | | |
| | 15350.00 | | | | | | |
| | Amount Incurred This Period | Payment This Period | | Outstandir | ng Balance at Close of | This F | Period |
| | 0.00 | 0.0 | 00 | | 15 | 350.00 |) |
| | | , , | | | , | | |
| ٠, | | | | | 42 | 367.56 | ; |
| 1) | SUBTOTALS This Period This Page (optional) | | | - | 1 | 301.00 | - |
| 2) | TOTALS This Period (last page this line number or | nly) | | ــــــــــــــــــــــــــــــــــــــ | | | |
| 31 | TOTAL OUTSTANDING LOANS from Schodule C | (last page only) | | | | | |
| ა) | TOTAL OUTSTANDING LOANS from Schedule C | (last page utily) | | - | | - | # |

FEC Schedule D (Form 4) (Revised 1/01)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

DEBTS AND OBLIGATIONS Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 41 OF 57 FOR LINE (check only

| NUMBER: | |
|---------|----|
| one) | 9 |
| | 40 |

NAME OF COMMITTEE (In Full)

| | Cleveland | 2016 | Host | Committee | Inc |
|--|-----------|------|------|-----------|-----|
|--|-----------|------|------|-----------|-----|

| | Cleveland 2016 Host Committee Inc | | | | | |
|----|---|--------------------------------------|---|--|--|--|
| | A. Full Name (Last, First, Middle Initial) of Debtor of | Nature of Debt (Purpose): Parking | | | | |
| | City of Cleveland, Ohio | Faiking | | | | |
| | Mailing Address 601 Lakeside Ave Room 127 | | | | | |
| | City State Cleveland | Zip Code OH 44114 | | | | |
| | Outstanding Balance Beginning This Period | | Transaction ID: SD10.10577 | | | |
| | 3360.00 | | | | | |
| | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | |
| | 0.00 | 3360.00 | 0.00 | | | |
| ł | B. Full Name (Last, First, Middle Initial) of Debtor or | r Creditor | Nature of Debt (Purpose): | | | |
| | Cleveland Indians Baseball Comp | | Entertainment | | | |
| Ī | Mailing Address 2401 Ontario St. | | | | | |
| | City State Cleveland | Zip Code OH 44115 | | | | |
| | Outstanding Balance Beginning This Period 139566.72 | | Transaction ID : SD10.10588 | | | |
| | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | |
| | 0.00 | 139566.72 | 0.00 | | | |
| İ | C. Full Name (Last, First, Middle Initial) of Debtor of | or Creditor | Nature of Debt (Purpose): | | | |
| | Cleveland Key & Security | Security | | | | |
| İ | Mailing Address 1628 St. Clair Ave | | | | | |
| | City Cleveland | State Zip Code OH 44114 | | | | |
| | Outstanding Balance Beginning This Period | | Transaction ID : SD10.11100 | | | |
| | 0.00 | | | | | |
| | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period | | | |
| | 1504.89 | 0.00 | 1504.89 | | | |
| 1 | CURTOTAL & This Daried This Dags (antisard) | | 1504.89 | | | |
| 1) | SUBTOTALS This Period This Page (optional) | | | | | |
| 2) | TOTALS This Period (last page this line number or | nly) | | | | |
| 3) | TOTAL OUTSTANDING LOANS from Schedule C | (last page only) | | | | |
| 4) | ADD 2) and 3) and carry forward to appropriate lin | ne of Summary Page (last page only) | | | | |

Evoluding Loans

(Use separate schedule(s) for each numbered line) PAGE 42 OF 57
FOR LINE NUMBER: (check only one) 9

| Excluding Loans | | numbered line) | x 10 |
|---|--|-------------------|--------------------------------|
| NAME OF COMMITTEE (In Full) | | | |
| Cleveland 2016 Host Co | ommittee Inc | | |
| A. Full Name (Last, First, Middle Initial) of De | | Nature of Debt (F | ourpose): |
| Cleveland State University | | Lodging | , |
| | | | |
| Mailing Address 2450 Euclid Ave. | | | |
| City State | Zip Code | | |
| Cleveland | OH 44115 | | |
| Outstanding Balance Beginning This Period | | Transaction ID | : SD10.10768 |
| 112620.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Ra | alance at Close of This Period |
| | | | |
| 0.00 | 112620 | .00 | 0.00 |
| B. Full Name (Last, First, Middle Initial) of Del | ptor or Creditor | Nature of Debt (F | ourpose): |
| CORT Furniture | | Furniture | , |
| | | | |
| Mailing Address 4698 Great Northern Blvd | | | |
| City State | Zip Code | | |
| North Olmstead | OH 44070 | | |
| Outstanding Balance Beginning This Period | | Transaction II | D : SD10.10589 |
| 44.79 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Ba | alance at Close of This Period |
| | | | |
| 0.00 | 44 | .79 | 0.00 |
| C. Full Name (Last, First, Middle Initial) of De | ebtor or Creditor | Nature of Debt (F | ourpose): |
| Destination Cleveland | | Reimbursement | |
| | | | |
| Mailing Address 334 Euclid Ave | | | |
| City | State Zip Code | | |
| Cleveland | OH 44114 | | |
| Outstanding Balance Beginning This Period | | Transaction II | D : SD10.11107 |
| 0.00 | | | |
| Amount Incurred This Period | Payment This Period | Outstanding Ba | lance at Close of This Period |
| | | | |
| 28906.01 | | .00 | 28906.01 |
| | | | |
| 1) SUBTOTALS This Period This Page (optional | I) | | 28906.01 |
| | | | |
| 2) TOTALS This Period (last page this line num | ber only) | | |
| 3) TOTAL OUTSTANDING LOANS from Schedu | ule C (last page only) | | , |
| | | | |
| 4) ADD 2) and 3) and carry forward to appropri | ate line of Summary Page (last page of | only) | |

: 97 'A = G7 9 @ G B9 C I G'H9 L H F 9 @ 5 H9 8 'HC '5 'F 9 D C F H Z G7 < 98 I @ 'C F '+ H9 A = N 5 H = C B

Form/Schedule: SD10 Transaction ID: SD10.10768

(Current loan amount of 1580.00 from a balance of 114200.00 has been forgiven)(A previous settlement amount of 1580.00 has been rescinded)

Form/Schedule: Transaction ID:

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 44 OF 57 FOR (chec

| LINE NUMBER: | | |
|--------------|---|----|
| k only one) | | 9 |
| | ζ | 10 |

| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Downtown Cleveland Alliance | | | Nature of Debt (Purpose): Flowers |
|---|------------------|-------------------|---|
| Mailing Address 1010 Euclid Ave 3rd Floor | | | |
| City State Cleveland | Zip Code OH | 44115 | |
| Outstanding Balance Beginning This Period | | | Transaction ID : SD10.10590 |
| 904.75 | | | |
| Amount Incurred This Period | Payn | nent This Period | Outstanding Balance at Close of This Period |
| 0.00 | , | 904.75 | 0.00 |
| B. Full Name (Last, First, Middle Initial) of Debtor Downtown Cleveland Alliance | or Creditor | | Nature of Debt (Purpose): Transportation |
| Mailing Address 1010 Euclid Ave 3rd Floor | | | |
| City State Cleveland | Zip Code OH | 44115 | |
| Outstanding Balance Beginning This Period 572.85 | D | word This Posted | Transaction ID : SD10.10610 |
| Amount Incurred This Period | Payr | ment This Period | Outstanding Balance at Close of This Perio |
| 0.00 | , | 0.00 | 572.85 |
| C. Full Name (Last, First, Middle Initial) of Debtor Downtown Cleveland Alliance | or Creditor | | Nature of Debt (Purpose): Beautification |
| Mailing Address 1010 Euclid Ave | | | |
| City Cleveland | State OH | Zip Code 44115 | |
| Outstanding Balance Beginning This Period | | | Transaction ID: SD10.11088 |
| 0.00 | | | |
| Amount Incurred This Period | Payr | ment This Period | Outstanding Balance at Close of This Perio |
| 6550.00 | , | 0.00 | 6550.00 |
| SUBTOTALS This Period This Page (optional) | | | 7122.85 |
| TOTALS This Period (last page this line number | only) | | |
| TOTAL OUTSTANDING LOANS from Schedule (| C (last page onl | y) | |
| | | | |

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 45 OF
FOR LINE NUMBER:
(check only one)

| R: | | |
|----|---|----|
| | | 9 |
| | Y | 10 |

57

| Cidding Loans | · | |
|--|---------------------------------------|---|
| AME OF COMMITTEE (In Full) | 144 | |
| Cleveland 2016 Host Com | nmittee Inc | |
| A. Full Name (Last, First, Middle Initial) of Debto | Nature of Debt (Purpose): Event/sound | |
| Eight Day Sound System, Inc. | | |
| Mailing Address 5450 Avion Park Drive | | |
| City State | Zip Code | |
| Highland Heights | OH 44143 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.11089 |
| 0.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 2300.00 | 0.00 | 2300.00 |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Fastsigns | | Signage |
| Mailing Address 2102 St. Clair Ave | | |
| City State Cleveland | Zip Code OH 44114 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.10591 |
| 116.92 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| | 116.92 | 0.00 |
| 0.00 | 110.92 | , , , , , |
| C. Full Name (Last, First, Middle Initial) of Debto | or or Creditor | Nature of Debt (Purpose): |
| Fatheads LLC | | Posters |
| Mailing Address 28765 Network Place | | |
| City | State Zip Code | |
| Chicago | IL 60673 | |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.10806 |
| 16158.46 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 16158.46 |
| <u>l</u> | | 40450 40 |
| SUBTOTALS This Period This Page (optional) | | 18458.46 |
| TOTALS This Period (last page this line number | only) | , , |
| TOTAL OUTSTANDING LOANS from Schedule | C (last page only) | |
| ADD 2) and 3) and carry forward to appropriate | line of Summary Page (last page only) | |

Excluding Loans NAME OF COMMITTEE (In Full)

(Use separate schedule(s) for each numbered line)

PAGE 46 OF 57 FOR (chec

| LINE NUMBER: | | 9 |
|--------------|---|----|
| | X | 10 |

| Cleveland 2016 Host Co | ommittee Inc | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) of E | Nature of Debt (Purpose): Media consulting | |
| Mailing Address 1900 m Street Suite 810 | | |
| City State Washington | Zip Code DC 20036 | |
| Outstanding Balance Beginning This Perio | od | Transaction ID : SD10.11090 |
| 0.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 11000.00 | 0.00 | 11000.00 |
| B. Full Name (Last, First, Middle Initial) of De Gordon C. James Public Rel | | Nature of Debt (Purpose): Expense reimbursement |
| Mailing Address 1900 m Street Suite 810 | | |
| City State Washington | Zip Code DC 20036 | |
| Outstanding Balance Beginning This Perio | | Transaction ID : SD10.11104 |
| 0.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 2414.48 | 0.00 | 2414.48 |
| C. Full Name (Last, First, Middle Initial) of C | Debtor or Creditor | Nature of Debt (Purpose): Transportation |
| Mailing Address 1240 W 6th Street | | |
| City Cleveland | State Zip Code OH 44113 | |
| Outstanding Balance Beginning This Perio | od | Transaction ID : SD10.10592 |
| 36000.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 36000.00 | 0.00 |
| 1) SUBTOTALS This Period This Page (option: | nal) | 13414.48 |
| 2) TOTALS This Period (last page this line nur | mber only) | |
| 3) TOTAL OUTSTANDING LOANS from Sched | dule C (last page only) | |
| 4) ADD 2) and 3) and carry forward to approp | oriate line of Summary Page (last page only) | |

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 47 OF 57 FOR LINE (check or

| E NUMBER: | | |
|-----------|-----|----|
| nly one) | | 9 |
| | , . | 10 |

| xcluding Loans | | |
|--|----------------------|---|
| NAME OF COMMITTEE (In Full) | | |
| Cleveland 2016 Host Com | mittee Inc | |
| A. Full Name (Last, First, Middle Initial) of Debtor | r or Creditor | Nature of Debt (Purpose): |
| Greater Cleveland Sports Com | mission | Salary and benefits |
| Mailing Address 334 Euclid Ave | | |
| City State Cleveland | Zip Code OH 44114 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.10593 |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.0 | 0 13747.26 |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Hampton Inn & Suites Cleveland | | Lodging |
| Mailing Address 1460 East 9th Street | | |
| City State Cleveland | Zip Code OH 44114 | |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.10579 |
| 73635.85 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 73635.8 | 5 0.00 |
| C. Full Name (Last, First, Middle Initial) of Debtor | r or Creditor | Nature of Debt (Purpose): |
| Hampton Inn & Suites Clevelan | | Lodging |
| Mailing Address 1460 East 9th Street | | |
| City | State Zip Code | |
| Cleveland | OH 44114 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.10581 |
| 6045.76 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 6045.70 | 6 0.00 |
| | | 13747.26 |
| 1) SUBTOTALS This Period This Page (optional) | | 13747.20 |

FEC Schedule D (Form 4) (Revised 1/01)

2) TOTALS This Period (last page this line number only)

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 48 OF 57 FOR LINE NUM (check only one

| MBER: | |
|-------|---------|
| e) | 9 |
| | ا ا |

| Cidding Loans | · | A 10 |
|--|---------------------------------------|---|
| AME OF COMMITTEE (In Full) | | |
| Cleveland 2016 Host Con | nmittee Inc | |
| A. Full Name (Last, First, Middle Initial) of Debto | or or Creditor | Nature of Debt (Purpose): |
| Hilton Cleveland Downtown | | Lodging |
| Mailing Address 100 Lakeside Ave | | |
| City State | Zip Code | |
| Cleveland | ОН 44114 | |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.11103 |
| 0.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 23085.25 | 0.00 | 23085.25 |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Holiday Inn Express Downtown | | Lodging |
| Mailing Address 629 Euclid Ave | | _ |
| Mailing Address 629 Euclid Ave | | |
| City State | Zip Code OH 44114 | |
| Outstanding Balance Beginning This Period | OH 44114 | Transaction ID : SD10.11091 |
| | | Halisaction ib . 3D10.11091 |
| 0.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 9752.98 | 0.00 | 9752.98 |
| C. Full Name (Last, First, Middle Initial) of Debto | or or Creditor | Nature of Debt (Purpose): |
| Hudson Incentives & Imprints | | Advertising |
| Mailing Address 1592 Georgetown Rd. | | |
| - | 7: 0 1 | |
| City Hudson | State Zip Code OH 44236 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.10594 |
| 3827.27 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 3827.27 | 0.00 |
| 0.00 | 3021.21 | 0.00 |
| | | |
|) SUBTOTALS This Period This Page (optional) | | 32838.23 |
|) TOTALS This Period (last page this line number | only) | |
| , | - 77 | |
|) TOTAL OUTSTANDING LOANS from Schedule | C (last page only) | |
| ADD 2) and 3) and carry forward to appropriate | line of Summary Page (last page only) | |

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR L (check

| | PAGE | 49 | OF | 57 |
|-----|---------|------|----|----|
| .IN | IE NUMI | BER: | | 1 |
| 0 | nly one |) | | 9 |
| | | | × | 10 |

| | ME OF COMMITTEE (In Full) Sleveland 2016 Host Com | mittee I | nc | |
|----|--|-----------------|-------------------------|---|
| | A. Full Name (Last, First, Middle Initial) of Debtor Hussey Seating Company | | | Nature of Debt (Purpose): Chairs |
| f | Mailing Address P.O. Box 983122 | | | |
| | City State Boston | Zip Code MA | 02298 | |
| | Outstanding Balance Beginning This Period | | | Transaction ID : SD10.10578 |
| | Amount Incurred This Period | Paym | nent This Period | Outstanding Balance at Close of This Period |
| | 0.00 | | 0.00 | 16570.00 |
| | B. Full Name (Last, First, Middle Initial) of Debtor of Jani-King of Cleveland | or Creditor | | Nature of Debt (Purpose): Cleaning |
| | Mailing Address 9075 Town Centre Drive Suite 200 City State | Zip Code | | |
| | Broadview Hts. | OH OH | 44147 | |
| | Outstanding Balance Beginning This Period 0.00 | | | Transaction ID : SD10.11101 |
| | Amount Incurred This Period | Payn | nent This Period | Outstanding Balance at Close of This Period |
| | 530.00 | | 0.00 | 530.00 |
| | C. Full Name (Last, First, Middle Initial) of DebtorJones Day | or Creditor | | Nature of Debt (Purpose): Legal services |
| Ī | Mailing Address 901 Lakeside Ave | | | |
| | City Cleveland | State OH | Zip Code 44114 | |
| | Outstanding Balance Beginning This Period 27608.20 | | | Transaction ID : SD10.10807 |
| | Amount Incurred This Period | Payn | nent This Period | Outstanding Balance at Close of This Period |
| | 0.00 | | 0.00 | 27608.20 |
| 1) | SUBTOTALS This Period This Page (optional) | | | 44708.20 |
| 2) | TOTALS This Period (last page this line number of | only) | | |
| 3) | TOTAL OUTSTANDING LOANS from Schedule C | (last page only | y) | |
| 4) | ADD 2) and 3) and carry forward to appropriate li | ine of Summary | y Page (last page only) | , , |

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 50 OF 57 FOR LINE (check or

| E NUMBER: | | |
|-----------|---|----|
| nly one) | | 9 |
| | X | 10 |

| | A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kalahari | | |
|--|--|-------------------|---|
| Mailing Address 7000 Kalahari Drive | | | |
| City State Sandusky | Zip Code OH | 44870 | |
| Outstanding Balance Beginning This Period 71059.00 | | | Transaction ID : SD10.10595 |
| Amount Incurred This Period | Paym | ent This Period | Outstanding Balance at Close of This Period |
| -19928.85 | ,. | 0.00 | 51130.15 |
| S. Full Name (Last, First, Middle Initial) of Debtor KeyCorp | or Creditor | | Nature of Debt (Purpose): Credit card payment |
| Mailing Address 127 Public Square | | | |
| City State Cleveland | Zip Code OH | 44114 | |
| Outstanding Balance Beginning This Period 0.00 | | | Transaction ID: SD10.11106 |
| Amount Incurred This Period | Paym | nent This Period | Outstanding Balance at Close of This Perio |
| 16603.73 | L, | 0.00 | 16603.73 |
| C. Full Name (Last, First, Middle Initial) of Debtor Musical Arts Association | r or Creditor | | Nature of Debt (Purpose): Event/restroom facilities |
| Mailing Address 11001 Euclid Avenue | | | |
| city Cleveland | State OH | Zip Code 44106 | |
| Outstanding Balance Beginning This Period 0.00 | | | Transaction ID: SD10.11092 |
| Amount Incurred This Period | Paym | nent This Period | Outstanding Balance at Close of This Perio |
| 1662.50 | · , . | 0.00 | 1662.50 |
| SUBTOTALS This Period This Page (optional) | | | 69396.38 |
| TOTALS This Period (last page this line number | only) | | |
| TOTAL OUTSTANDING LOANS from Schedule (| C (last page only | /) | |

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR (che

| | PAGE | 51 | OF | 57 |
|------|---------|------|----|----|
| LIN | IE NUMI | BER: | | |
| ck o | nly one |) | | 9 |
| | | | × | 10 |

| cidding Loans | | A 10 |
|---|---|---|
| AME OF COMMITTEE (In Full) | | |
| Cleveland 2016 Host Com | nmittee Inc | |
| A. Full Name (Last, First, Middle Initial) of Debto | | Nature of Debt (Purpose): |
| Pieter Bouterse Studio Inc | or or ordinor | Event decor |
| Tieter Bouterse Studio Inc | | |
| Mailing Address 26001 Miles Road | | |
| Studio #7 City State | Zip Code | |
| Warrensville Heights | OH 44128 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.10597 |
| | | |
| 28200.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 28200.00 | 0.00 |
| | | |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| PSAV Presentation Services | | Audio/video services |
| Mailing Address 300 Lakeside Ave. E | | |
| Widning Address Soo Lakeside Ave. E | | |
| City State | Zip Code | |
| Cleveland | OH 44114 | |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.10599 |
| 720.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| | | |
| 0.00 | 720.00 | 0.00 |
| C. Full Name (Last, First, Middle Initial) of Debto | or or Creditor | Nature of Debt (Purpose): |
| | of Greator | Event/equipment |
| Rapid 2-Way | | |
| Mailing Address 6440 Norwalk Rd. | | |
| Unit E | State Zip Code | |
| City Medina | OH 44256 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.11094 |
| | | 11a115action 1D . 3D 10.11094 |
| 0.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 2500.00 | 0.00 | 2500.00 |
| | | |
| | | |
| SUBTOTALS This Period This Page (optional) | | 2500.00 |
| TOTAL 0. THE D. 1. I. | | |
| TOTALS This Period (last page this line number | only) | |
| TOTAL OUTSTANDING LOANS from Schedule | C (last page only) | |
| | . , , , , , , , , , , , , , , , , , , , | - |
| ADD 2) and 3) and carry forward to appropriate | line of Summary Page (last page only) | |

(Use separate schedule(s) for each numbered line)

PAGE 52 OF FOR LINE NUMBER: (check only one)

| | 9 |
|---|----|
| ~ | 10 |

57

Excluding Loans

NAME OF COMMITTEE (In Full)

| Cleveland 2016 Host Com | millee inc | |
|--|---------------------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor | r or Creditor | Nature of Debt (Purpose): |
| Stevens Van Lines | | Transportation |
| Mailing Address 23600 Corbin Drive | | |
| City State | Zip Code | |
| Bedford Heights | OH 44128 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.10600 |
| 11890.26 | | |
| 11890.26 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 11890.26 |
| | | |
| B. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | Nature of Debt (Purpose): |
| Stevens Van Lines | | Moving and storage |
| Mailing Address agence Out to Date | | _ |
| Mailing Address 23600 Corbin Drive | | |
| City State | Zip Code | |
| Bedford Heights | OH 44128 | |
| Outstanding Balance Beginning This Period 0.00 | | Transaction ID : SD10.11095 |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| | | |
| 67787.67 | 0.00 | 67787.67 |
| C. Full Name (Last, First, Middle Initial) of Debtor | r or Creditor | Nature of Debt (Purpose): |
| Stevens Van Lines | | Moving and storage |
| | | |
| Mailing Address 23600 Corbin Drive | | |
| City | State Zip Code | |
| Bedford Heights | OH 44128 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.11096 |
| 0.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| | | |
| 4285.08 | 0.00 | 4285.08 |
| 1 | | |
| 1) SUBTOTALS This Period This Page (optional) | | 83963.01 |
| | | |
| 2) TOTALS This Period (last page this line number | only) | |
| 3) TOTAL OUTSTANDING LOANS from Schedule (| C (last page only) | , , |
| 4) ADD 2) and 3) and carry forward to appropriate | line of Summary Page (last page only) | |

(Use separate schedule(s)

PAGE 53 OF FOR LINE NUMBER:

57

| DEBIS AND OBLIGATIONS Excluding Loans | | | for each numbered line) | (check only one) | 9 10 |
|---|------------------|-----------------|-------------------------|------------------------|-------------|
| NAME OF COMMITTEE (In Full) | | | | | <u> </u> |
| Cleveland 2016 Host Com | mittee Ir | nc | | | |
| A. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | | | ebt (Purpose): | |
| Taylor Oswald LLC | | | insurance | | |
| Mailing Address 1100 Superior Ave. E | | | | | |
| City State | Zip Code | | | | |
| Cleveland | ОН | 44114 | | | |
| Outstanding Balance Beginning This Period | | | Transacti | on ID : SD10.10601 | |
| 97690.00 | | | | | |
| Amount Incurred This Period | Payme | ent This Period | Outstandi | ng Balance at Close of | This Period |
| 0.00 | | 97690.0 | 00 | | 0.00 |
| | , | - , | | , , | |
| B. Full Name (Last, First, Middle Initial) of Debtor of | or Creditor | | Nature of D Gifts | ebt (Purpose): | |
| The Bonfoey Gallery | | | Giille | | |
| Mailing Address 1710 Euclid Avenue | | | | | |
| City State | Zip Code | | | | |
| Cleveland | ОН | 44115 | | | |
| Outstanding Balance Beginning This Period | | | Transact | ion ID : SD10.11097 | |
| 0.00 | | | | | |
| Amount Incurred This Period | Paymo | ent This Period | Outstandi | ng Balance at Close of | This Period |
| 4161.74 | , . | 0.0 | 00 | , 41 | 161.74 |
| C. Full Name (Last, First, Middle Initial) of Debtor | or Creditor | | Nature of D | ebt (Purpose): | |
| The Morning Group | or Creditor | | | eimbursements | |
| | | | | | |
| Mailing Address 525 G Street SE #15 | | | | | |
| City | State | Zip Code | | | |
| Washington | DC | 20003 | | | |
| Outstanding Balance Beginning This Period | | | Transac | tion ID : SD10.10607 | |
| 3809.98 | | | | | |
| Amount Incurred This Period | Paymo | ent This Period | Outstandii | ng Balance at Close of | This Period |
| -1904.99 | | 0.0 | 00 | 19 | 904.99 |
| | , | , | | , | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 60 | 066.73 |
| 1, CODICIALO TINO FENOU TINO FAGE (OPIIONAI) | | | - | 7 7 7 7 | — |
| 2) TOTALS This Period (last page this line number of | only) | | | | |
| 3) TOTAL OUTSTANDING LOANS from Schedule C | (last page only) | | | | |

FEC Schedule D (Form 4) (Revised 1/01)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

: 97 'A = G7 9 @ G B9 C I G'H9 L H F 9 @ 5 H9 8 'HC '5 'F 9 D C F H Z G7 < 98 I @ 'C F '+ H9 A = N 5 H = C B

Form/Schedule: SD10 Transaction ID: SD10.10607

(Current loan amount of 1904.99 from a balance of 3809.98 has been forgiven)(A previous settlement amount of

1904.00 has been rescinded)

Form/Schedule: Transaction ID:

DEBTS AND OBLIGATIONS Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 55 OF FOR LINE NUMBER (check only one)

| ₹: | | |
|----|---|----|
| | | 9 |
| | × | 10 |

57

NAME OF COMMITTEE (In Full)

| Old Volulia Ed to thook Oditilitikoo iii | Cleveland | 2016 | Host | Committee | Inc |
|--|-----------|------|------|-----------|-----|
|--|-----------|------|------|-----------|-----|

| Cieveiana 201 | 16 Host Comn | nittee ir | 1C | |
|-----------------------------|----------------------------------|-----------------|-----------------------|---|
| A. Full Name (Last, First | t, Middle Initial) of Debtor o | r Creditor | | Nature of Debt (Purpose): |
| Transportation | Management Serv | vices | | Transportation |
| Mailing Address 17810 I | Meetinghouse Road | | | |
| City State Sandy Springs | | Zip Code MD | 20860 | |
| Outstanding Balance B | Seginning This Period | | | Transaction ID : SD10.10609 |
| | 39510.80 | | | |
| Amount Incurre | d This Period | Paymo | ent This Period | Outstanding Balance at Close of This Period |
| | 0.00 | , | 39510.80 | 0.00 |
| B. Full Name (Last, First, | Middle Initial) of Debtor or | Creditor | | Nature of Debt (Purpose): |
| Union Club of C | Cleveland | | | Lodging |
| Mailing Address 1211 E | uclid Ave | | | |
| City State | | Zip Code | | |
| Cleveland | | OH | 44115-1865 | |
| Outstanding Balance B | seginning This Period 1863.38 | | | Transaction ID : SD10.10582 |
| Amount Incurre | d This Period | Paym | ent This Period | Outstanding Balance at Close of This Period |
| | 0.00 | | 0.00 | 1863.38 |
| C. Full Name (Last, First | t, Middle Initial) of Debtor o | or Creditor | | Nature of Debt (Purpose): |
| W.B. Mason C | o., Inc. | | | Office supplies |
| Mailing Address 59 Cen | tre Street | | | |
| City Brockton | | State MA | Zip Code 02301 | |
| Outstanding Balance B | Beginning This Period | | | Transaction ID: SD10.10602 |
| | 76.77 | | | |
| Amount Incurre | d This Period | Paym | ent This Period | Outstanding Balance at Close of This Period |
| | 0.00 | | 76.77 | 0.00 |
| 4) 011070741 0 711 5 1 | d This Page () | | | 1863.38 |
| 1) SUBTOTALS This Period | d This Page (optional) | | ······ | , |
| 2) TOTALS This Period (las | st page this line number on | ıly) | <u></u> | |
| 3) TOTAL OUTSTANDING | LOANS from Schedule C (| (last page only |) | |
| 4) ADD 2) and 3) and carr | y forward to appropriate lin | e of Summary | Page (last page only) | |

(Use separate schedule(s) **DEBTS AND OBLIGATIONS** for each numbered line) **Excluding Loans**

PAGE 56 OF 57 FOR (check

| LINE NUMBER: | | |
|--------------|----|----|
| | | |
| | ζ. | 10 |

| 10 1112 01 00111111122 (1111 011) | NAME OF | COMMITTEE (| (In | Full) |
|-----------------------------------|---------|-------------|-----|-------|
|-----------------------------------|---------|-------------|-----|-------|

| Cleveland 2016 Host Com | nmittee Inc | |
|--|---------------------------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debto W.B. Mason Co., Inc. | r or Creditor | Nature of Debt (Purpose): Office supplies |
| Mailing Address 59 Centre Street | | |
| City State Brockton | Zip Code MA 02301 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.10603 |
| 64.98 | Doumant This Pariod | Outstanding Release at Class of This Paried |
| Amount Incurred This Period 0.00 | Payment This Period 64.98 | Outstanding Balance at Close of This Period 0.00 |
| B. Full Name (Last, First, Middle Initial) of Debtor Welty Building Co. | or Creditor | Nature of Debt (Purpose): Construction services |
| Mailing Address 515 Euclid Avenue Suite 100 | | |
| City State Cleveland | Zip Code OH 44114 | |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.10604 |
| 103941.20 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 103941.20 |
| C. Full Name (Last, First, Middle Initial) of Debto Welty Building Co. | or or Creditor | Nature of Debt (Purpose): Construction services |
| Mailing Address 515 Euclid Avenue Suite 100 | | |
| City Cleveland | State Zip Code OH 44114 | |
| Outstanding Balance Beginning This Period | | Transaction ID: SD10.10605 |
| 133426.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 133426.00 |
|) SUBTOTALS This Period This Page (optional) | | 237367.20 |
|) TOTALS This Period (last page this line number | only) | |
|) TOTAL OUTSTANDING LOANS from Schedule | C (last page only) | |
|) ADD 2) and 3) and carry forward to appropriate | line of Summary Page (last page only) | |

(Use separate schedule(s) for each numbered line)

PAGE 57 OF 57 FOR (che

| R LINE NUMBER: | | |
|----------------|---|----|
| | | |
| | v | 10 |

Excluding Loans

| NAME OF COMMITTEE (I | In | Full) |
|----------------------|----|-------|
|----------------------|----|-------|

| Cleveland 2016 Host Com | nmittee Inc | |
|---|----------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Zenith Systems, LLC | | Nature of Debt (Purpose): Wiring |
| Mailing Address 5055 Corbin Drive | | |
| City State Bedford Heights | Zip Code OH 44128 | |
| Outstanding Balance Beginning This Period | | Transaction ID : SD10.11099 |
| 0.00 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 165.42 | 0.00 | 165.42 |
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | Nature of Debt (Purpose): |
| Mailing Address | | |
| City State | Zip Code | |
| Outstanding Balance Beginning This Period Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| | | |
| C. Full Name (Last, First, Middle Initial) of Debto | or or Creditor | Nature of Debt (Purpose): |
| Mailing Address | | |
| City | State Zip Code | |
| Outstanding Balance Beginning This Period | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| | | |
| SUBTOTALS This Period This Page (optional) | | 165.42 |
| TOTALS This Period (last page this line number only) | | 604390.06 |
| TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | 0.00 |
| ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | 604390.06 |